

Chromosome Studies on Human Subjects
Exposed to Arsenic in Drinking Water

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**CHROMOSOME STUDIES ON HUMAN SUBJECTS EXPOSED TO ARSENIC
IN DRINKING WATER**

By

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Contract # 68-03-3170

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NOTICE

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FOREWORD

The many benefits of our modern, developing, industrial society are accompanied by certain hazards. Careful assessment of the relative risk of existing and new man-made environmental hazards is necessary for the establishment of sound regulatory policy. These regulations serve to enhance the quality of our environment in order to promote the public health and welfare and the productive capacity of our Nation's population.

The complexities of environmental problems originate in the deep interdependent relationships between the various physical and biological segments of man's natural and social world. Solutions to these environmental problems require an integrated program of research and development using input from a number of disciplines. The Health Effects Research Laboratory, Research Triangle Park, NC and Cincinnati, OH, conducts a coordinated environmental health research program in toxicology, epidemiology, and clinical studies using human volunteer subjects. Wide ranges of pollutants known or suspected to cause health problems are studied. The research focuses on air pollutants, water pollutants, toxic substances, hazardous wastes, pesticides, and non-ionizing radiation. The laboratory participates in the development and revision of air and water quality criteria and health assessment documents on pollutants for which regulatory actions are being considered. Direct support to the regulatory function of the Agency is provided in the form of expert testimony and preparation of affidavits as well as expert advice to the Administrator to assure the adequacy of environmental regulatory decisions involving the protection of the health and welfare of all U.S. inhabitants.

This was a cross sectional epidemiologic study designed to test the relationship(s) of exposure to waterborne arsenic and incidence of chromosome aberrations and sister chromatid exchanges in humans. Exposure was defined as consumption of drinking water containing at least 0.05 mg/l for at least 5 years. No statistically significant ($p < 0.05$) relationships were found between the cytogenetic measurements and exposure to waterborne arsenic.

F. Gordon Hueter, Ph.D
Director
Health Effects Research Laboratory

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ABSTRACT

A two-year study was carried out on human subjects of various ages and backgrounds who have been drinking water containing 0.05 mg/l (0.05 ppm) or more arsenic for a period of at least 5 years. A control group that had been exposed to arsenic in drinking water at concentrations less than 0.05 mg/l was used for some aberrations and sister chromatid exchanges in the lymphocytes of the two populations with the amount of arsenic in the water they have been drinking. Besides, a questionnaire was designed to explore the incidence of skin cancer, fetal wastage, any genetic development abnormalities in the family and related parameters. Several other variables, e.g., coffee, wine and cigarette consumption, sex, residence (rural vs. urban) and exposure to chemicals, smelter and pesticides were taken into consideration. The study involved the city of and areas in the vicinity of Reno, Nevada, USA.

Our data on chromosome aberrations (104 exposed and 86 control individuals) and on sister chromatid exchanges (98 exposed and 83 control individuals) did not show that arsenic at a mean level of 0.109 mg/l has any effect on these parameters. Similarly, no effect of arsenic at these modest concentrations was found on other health parameters studied.

INTRODUCTION

The metalloid arsenic (AS) is characterized by its presence in all environmental substrates. It is primarily found as As^{3+} or As^{5+} , in both inorganic and organic complexes (arsenicals) with varying degrees of toxicity, biological activity and stability. In trivalent forms it is more toxic than in pentavalent form. It is more readily absorbed by animals in organic than in inorganic combinations. Human body contains 40-3000 ppb arsenic (Jukes, 1979), primarily obtained from various foods and drinks, notably sea food and wines. Sea weeds also contain high quantities of the metalloid.

The metalloid has gained notoriety primarily as a suspect carcinogen in drinking water and evidence has been forthcoming showing several types of ill effects including death (Zaldivar, 1972, Lisella et al., 1972, Tseng et al., 1968). Generally, chronic exposures to elevated levels of As produce weakness, muscular aching, prostration, cutaneous manifestations, localized pigmentation, hyper-keratosis especially over hands and soles, polyneuritis (including numbness, tingling, prickly sensation) and a decrease in sensitivity to touch, pain and temperature (Vallee et al., 1960; Heymen et al., 1956). More severe intoxication may also result in kidney degeneration, liver cirrhosis, gastrointestinal catarrh and bone marrow injury. Anemia resulting from consumption of contaminated soy sauce and milk (Mizuta et al., 1956) and electromyographic abnormalities among the residents in the vicinity of arsenic smelting operations (Tsuchiya, 1977) have also been reported. Borgono and Griebner (1972) and Zaldivar (1974) even reported deaths due to cardiovascular problems, especially thrombosis of mesenteric and brain arteries, myocardial infarction and narrowing of coronary arteries.

The main concern of USEPA, however, has been the carcinogenic potential of As when ingested in various forms, especially in drinking water. A few scattered reports from abroad have linked the presence of As in drinking water to cancer of skin. Tseng et al. (1968), for example, reported an episode of water-borne As poisoning in southwest Taiwan. Skin cancer and keratosis were reported by these workers in the population which had been drinking well water containing more than 0.3 mg/l of As for as long as 45 years. The prevalence of skin cancer was reported to be in direct proportion to the arsenic content of the water. More recent investigations, however, indicate that skin cancer may be due to other causative agents.

The second consideration has been a study carried out in Chile. Borgono et al. (1977) related 0.8 ppm As in drinking water supply of the city of Antofagasta during 1958-1970, with hyper-pigmentation of skin. They found a startling rate of clinical manifestations (e.g., as high as 43.7% for hyperkeratosis among individuals with abnormal skin pigmentation). In a 1976 study the dermatologic lesions were not found in children under 6 years of age because "a water treatment plant, that started to operate in 1970, was built to solve the Problem." These conclusions can not, however, be readily

accepted because of several pitfalls in the study: for example, the methodologies are not clearly explained, nor are there any specific references to the study carried out in 1971.

Other studies have also found an association of cancer with exposure to arsenic. Neubauer (1947) noted increased incidence of skin cancer in residents of certain parts of England exposed to arsenic in drinking water, and Lee and Fraumeni (1969) observed a three-fold excess of respiratory cancer deaths among smelter workers. Similarly, a study by Dow Chemical Co. showed a threefold increase in lung cancer among employees in a dry arsenical manufacturing plant over the rate for nonexposed employees (Ott et al., 1975). Of all these studies however, only the Neubauer's study considers natural exposure to As in drinking water. The concentration of As in the water was estimated at a level of 12 mg/l. Some studies have failed to demonstrate increased incidence of cancer in industrial workers despite continued exposure to high concentrations of arsenic trioxide (Snegireff and Lombard, 1951; Pinto and Bennett, 1963).

Considering the data like those available in the above reports, the USEPA thought it prudent to set some sort of national standards for maximum concentration of various types of arsenicals in drinking water in this country. The "Interim Drinking Water Regulations" allow a maximum of 0.05 mg of total As (in all forms) per liter of drinking water (EPA, 1976). The report, however, does recognize the variations in the nature of chemical combinations in which As is available and the wide range of concentration of As in various geographic areas of this vast country. The report does not, nor was it expected to, recognize that the individuals in which cancer was observed might be some susceptible genetic isolate in which As is a precipitation cofactor rather than the cause of carcinogenicity.

Some studies have been carried out in the USA of populations exposed to arsenic in drinking water. Morton et al. (1976) could not find any association between arsenic levels (approximately 0.1mgAs/l) and incidence of cancer in Oregon. Similarly, a California study failed to show evidence of any specific illness associated with As (0.1 mg/l and 1.0 mg/l) in drinking water (Goldsmith et al., 1972). To these reports may be added a recent study by Southwick et al (1980) carried out in Utah in which no evidence of As induced dermatological problems was found in individuals exposed to As between 0.18 and 0.21 mg/l in drinking water. None-the-less such studies usually show accumulation, and hence increased levels, of As in some parts or fluids of the body, e.g. hair, nails, urine, when concentrations in drinking water exceed 0.05 mg/l. Such "storage - disposal" mechanisms may represent safety systems of the human body.

Even though arsenic poisoning is known to occur at doses as low as a few milligrams per day injected for about two weeks, the effects of a total lack of arsenic in the human body is not known. Arsenic has recently been shown to be an essential element for pigs, goats (Anke et al., 1976) and rats (Nielsen et al., 1975). Arsenic deficiency appears to cause loss of weight and even death (Davies, 1981). In chicks arsenic deficiency symptoms include increased hematocrits, decreased plasma uric acid and weak and twisted legs (Uthus and Nielsen, 1980). It has been suggested that arsenic may be necessary for utilization of zinc (Uthus and Nielsen, 1980). It may be a substitute for

phosphorus in the phosphorylation of nucleotides (see Nordberg and Anderson, 1981) although convincing evidence is still lacking.

Only limited information is available on the effects of arsenic on structure and function of genetic material (see Fishbein, 1981). To the best of our knowledge there are no studies on the genetic effects of naturally occurring arsenicals in drinking water to which man is exposed. A few studies on DNA, RNA and protein synthesis mainly confine to test tube experiments under artificially controlled conditions. Those dealing with effect on chromatin and chromosomes use lymphocytes of subjects exposed therapeutically to high concentrations of arsenic.

Arsenic blocks the cells in S- and G₂- phase (Peters et al 1977). Sibatani (1959) and Peters et al (1977) found a dose dependent inhibition in incorporation of radioactively labelled nucleotides in DNA of human lymphocytes in cultures exposed to 0.1 µg or more sodium arsenate/ml. Similar inhibition, though to a lesser degree, was seen for RNA synthesis. Rather strong inhibition of DNA synthesis and protein synthesis was reported by Nakamura and Sayato (1981). Inhibition of both single strand DNA breaks and post-replication repair have been reported in *Escherichia Coli* (Fong et al., 1980). None-the-less evidence for true mutagenic activity of arsenic is lacking (see Nordberg and Andersen, 1981). Thus whereas DNA repair inhibition may point to carcinogenic ability of arsenic, the lack of induction of point mutations may not be entirely compatible with this property (Also see Leonard and Lauwryns, 1980, for review).

There is ample evidence of chromosome aberrations in psoriatic patients treated with arsenic (Petres et al., 1977, 1981; Nordenson et al., 1979) and wine growers exposed to arsenic containing pesticides (Petres et al., 1977, 1981). Additionally, Nakamuro and Sayoto (1981) have shown a significantly higher frequency of chromosome aberrations in cultured human skin fibroblasts and leukocytes exposed to trivalent arsenics (NaAsO₃, AsCl₃, As₂O₃) than in those exposed to pentavalent forms (NaHASO₄, H₃AsO₄ and As₂O₅). These studies, along with those on colony forming ability of cells after exposure to arsenic, are compatible with others showing higher toxicity of trivalent forms than pentavalent. There is also evidence that the frequency of sister chromatid exchanges (SCE's) in psoriatic patients treated with arsenic compounds is elevated (Burgdorf et al., 1977). None-the-less when concentrations of arsenic trioxide were moderated to 12 mg As/kg body weight in Swiss albino male mice, there was no evidence of increase in the frequency of chromatid/chromosome aberrations in either bone marrow cells or spermatogonia (Poma et al., 1981).

For almost a decade, geneticists have been looking at correlation between mutagenicity and carcinogenicity of many chemicals. Bacterial studies initiated in Bruce Ames' lab at Berkeley have amply justified the slogan 'Carcinogens are mutagens'. More recently, cultured mammalian cells have been added to the battery of test organisms. These have provided a correlation between carcinogenic potentials of various chemicals and their ability to induce chromosome aberrations and SCE's, especially the latter, since a magnification in the frequency of SCE's can be observed at low concentrations of chemicals which are not effective in inducing traditional chromosome aberrations (Perry and Evens, 1975).

Therefore, if arsenic is a true carcinogen at low concentration as found in drinking water, it may effect the frequency of chromosome aberrations or, at least, SCE's in the lymphocytes of people exposed to this chemical in drinking water. It was therefore decided to study the frequency of chromosome aberrations and SCE's in the lymphocytes of a sample population exposed to arsenic in drinking water and to compare the data with those obtained from the control, 'non exposed', population sample.

SURVEY INFORMATION AND SAMPLING PROCEDURE

Like many parts of the nation, Nevada has several pockets of population which depend upon underground water either supplied through a municipal water system in large towns or through individual family wells. The town of Fallon, Nev. (Fig. 1), located approximately 55 miles northeast of Reno, Nev, has arsenic present at concentration of 0.1 mg/l in its municipal water supply. The town has a population of about 10,000 permanent residents, almost exclusively of European descent. A few isolated homes have their own wells where arsenic ranges between 0.08 mg/l to as high as 2.0 mg/l. In view of a stable, farming population and its reasonable vicinity to our lab in Reno, it was decided to study a sample of this population as the group "exposed" to arsenic in drinking water. A few individuals were also contacted in a nearby suburb of Reno, viz., Hidden Valley, where arsenic content of the well water supply is higher than the permissible 0.05 mg/l. The control group was entirely from Reno area which is served by the river water (Truckee River fed by over-flow from Lake Tahoe) with arsenic content in trace quantities not exceeding 0.005 mg/l.

A questionnaire (Appendix) was designed to obtain information about the following: sex, ethnic origin, age, occupation, environmental exposures to pesticides and other chemicals, water quality, food and drinking habits, smoking, health status, health related complaints, pregnancy complications, birth defects among the offsprings (a copy of the questionnaire is enclosed as Appendix to this report). Participation in our study was entirely voluntary; our only requirement being that the volunteer must have been drinking water containing (1) 0.05 mg/l or more arsenic for at least 5 years to be classified as "exposed" or (2) only traces of arsenic (≤ 0.005 mg/l) to qualify as control. The sample was selected without meeting the individuals personally, i.e., by random phone calls from the telephone directory of the city of Fallon. The controls were primarily from the student population, the faculty and colleagues working at the University of Nevada and at Nevada Mental Health Institute in Reno or were visitors to these places selected randomly, besides a few residents of the city. Only one call was made per individual. He/she was explained the purpose of the study, the risks involved, and the time required to answer the questionnaire. If an individual accepted our request the first time, he/she was included in the study. If the individual declined, no effort was made to persuade and he/she was not contacted again. We did not ask for the reason for accepting or declining our request. It is estimated that about 1/3 of those contacted refused to participate.

Those who accepted to participate were contacted in person at their residence at a time convenient to both parties. First, the questionnaire was discussed and answers filled in, preferably by the volunteer. Then a blood sample (approximately 5 ml) was drawn by venipuncture. Lastly, a sample of water from their kitchen tap was obtained in clean, sterile, plastic bottles. The appropriate consent forms were also completed, as necessary.

The average number of participants was between 2 and 3 per week. This was scheduled to avoid back-log of work and to distribute the sampling over a period of 1 1/2 years (October 1978 - May 1980). The procedure was to continue till a total of at least 150 subjects in both groups were studied. Actually a total of 191 individuals (105 exposed and 86 control) were analyzed.

LABORATORY METHODS

The telephone calls, interviews and sampling were accomplished by one of the technicians (M.F.). Once he brought the material back to the laboratory, the questionnaire and the samples were assigned a code number, the questionnaire was filed and after that we had to deal with coded samples only. The water sample was delivered to the State of Nevada Health Laboratory in Reno. This lab analyzed total arsenic content. Two methods were employed: atomic absorption using hydride generation and the colorimetric method using silver - diethyldithiocarbamate. The blood sample was divided into 5, 15 ml tubes each containing 7 ml of GIBCO 1 A chromosome medium and 0.3 ml of blood. One of these tubes was harvested at 48 hour post-culture and another 72 hour post culture. This was done to achieve 1st metaphase cells for chromosome aberration studies, in as many cases as possible. In the event of the failure of 48 hour culture the back-up 72 hour culture was used. The other 3 tubes were treated with 10^{-5} to 5×10^{-5} M BrdU starting at 36 hour post-culture and harvested 36 or 48 hours later. This was done to study the SCE's. Usually the 5th tube was never needed, and generally we were successful in obtaining desirable samples of cells for aberration study and SCE's only from a single tube each.

Chromosome preparations were made by routine techniques used in our lab. The cells were pretreated for 1 hour with 0.01 $\mu\text{g/ml}$ of colcemid, given hypotonic treatment with 0.075 M KCl for 10 minutes and fixed in cold 3:1 acetic acid:ethanol. The slides were coded only with numbers. For study of SCE's, the Hoescht 33258 pretreatment was followed by exposure to white light for 8 hours and then 1 hour incubation in 2 X SSC following the procedure by Perry and Wolff (1974). All slides were stained in 3% Giemsa for 5 minutes. At this point the slides were examined by the first technician (M.F.) for general quality. The principal investigator also studied samples from time to time.

The slides so prepared were handed over to another technician (M.C.). He was instructed to study up to 200 cells for chromosome aberrations, preferably from 48 hour preparations. The classification for aberrations was standard: gaps, breaks and exchanges of chromatid or chromosome type. For study of SCE's, up to 25 cells were to be analyzed. This second technician did not have any idea whether the particular case he studied came from the exposed or control population. He entered his data under the given code number and consulted the principal investigator at the time he had any doubts. Both technicians met with the P.I. regularly once every week to report the progress.

Quality Assurance: The reproducibility of the results and uniformity of standards applied throughout the study was assured from the very beginning. The water of the City of Fallon and Reno is routinely checked for arsenic content at least once a month by the State Health Laboratory. The samples obtained from individual homes therefore turned out to serve as duplicates. A few times the timings of obtaining these samples coincided with the timing of analyses for the bulk source serving these cities. In every case the replicate samples gave identical results. Besides at one point the project director took three samples, at random, from the homes of our study subjects and had them analysed elsewhere. The results again agreed with the analysis carried out in Reno. Also, two water samples sent to us from Cincinnati were analyzed in Reno with similar interpretation by both laboratories.

For study of cytogenetic parameters, three randomly selected samples were processed in duplicate. Each replicate was analyzed separately. The results were similar both for chromosome aberrations and SCE's. Also the technician with main responsibility for analysis of slides for chromosome aberrations and SCE's had studied several thousand cells for these parameters before we started working on this project. He was therefore well versed with various types of aberrations. Besides the P.I.'s major field of research is the study of cytogenetic end points in environmental mutagenesis studies and he has published extensively on induced chromosome aberrations. The P.I., on several occasions checked random samples of cells under the microscope and compared his interpretation with that recorded by the technician. The interaction between these individuals and other members in the lab assured that no guess work is being implied at any stage of the study.

The general quality of cells was also good. At one point, the Project's Director and Dr. Peter Bercz were also shown several cells under the microscope taken from different cases at random. Examples of two cells are produced in Figure 2.

THE POPULATION SAMPLE

Detailed information on the raw data on various aspects of these studies are provided in Table I.

A total of 211 individuals were included in the study. Of the cultures set up from these individuals, 196 were successful and yielded data on chromosome aberrations, sister chromatid exchanges, or both. Two cases representing residents of Cincinnati were eliminated from further consideration, so that comparisons could be made of samples from urban and rural Nevada. Three individuals were tested twice, to check repeatability of results over a short time interval. One set of results for each of these individuals was chosen at random for inclusion in the final analysis. This leaves a total of 191 cases on which further analysis was conducted. Of these, 190 had data for chromosome aberrations and 181 had data for SCE's. One individual who was drinking well water with 2.275 ppm arsenic, 6 times greater than the second highest value, was excluded from regression analyses using arsenic as an independent variable so as not to bias these results. It should be pointed out that this individual, a 45-year-old female Fallon resident, had fewer chromosome aberrations than 70% of the entire sample and fewer SCE's than 17% of the entire sample.

Table II shows the data on distributions of individuals in the exposed and control groups with respect to seven categorical variables measured in the study. There were no significant differences between exposed and control groups with respect to sex, exposure to pesticides, smelters, chemicals, or smoking (Chi-square analysis of 2x2 contingency tables). There were more wine drinkers among control than exposed individuals ($\chi^2 = 4.66$ on 1 df, $p = 0.03$) and more exposed individuals in the rural than in the urban sample ($\chi^2 = 74.56$ on 1 df, $p < 0.001$). The latter result, of course, was anticipated as part of the design of the study. Figures 3 - 5 show the distributions of control and exposed individuals with respect to age (Fig. 3), water consumption (Fig. 4), and coffee (Fig. 5) consumption. The mean age of the control group (29.6 years) was significantly ($p < 0.001$) less than that of the exposed group (42.2 years). Mean daily water consumption was not significantly different (4.35 glasses and 5.12 glasses, respectively, $p = 0.10$) nor was mean daily coffee consumption (3.30 cups and 4.09 cups, respectively; $p = 0.13$).

DATA ON GENETIC PARAMETERS

The details of the entire raw data relevant to the study of chromosome aberrations and SCE's are provided in Table I. A histogram showing distribution of water-borne arsenic levels is produced in figure 6. Thus, the range of arsenic content in drinking water in the control population was .005 mg/l to as high as 0.045 mg/l, and that in the exposed population was from 0.05 mg/l to 2.275 mg/l. The mean arsenic content in the water of the control group was 0.012 ± 0.001 mg/l whereas in the water of "exposed" population, not including the extreme value of 2.275 mg/l, was 0.109 ± 0.005 mg/l -- a value showing approximately 9-fold increase over that of the control. In other words the average arsenic content in the drinking water of the exposed population was 218% of the highest limit mandated by the USEPA regulations. The data provide a reasonable difference in arsenic content of the two populations upon which to base comparisons sought in this study. Additionally, the number of individuals studied in the exposed (105) and control (86) samples are reasonably good parameters to judge the effect of modest quantity of arsenic in drinking water. With these sample sizes and the observed variances, differences between control and exposed groups of approximately 0.007 chromosome aberration per cell and approximately 0.521 SCE's per cell should be detectable with 95% probability.

It is common knowledge that the frequency of chromosome aberrations and SCE's is influenced by a host of chemicals, physical agents and biological parameters. Some chemicals like several anticancer antibiotics and pesticides, physical agents like radiations and hyperthermia, biological parameters like certain genetic constitutions and ageing result in increased frequency of chromosome aberrations and SCE's. The effect of other factors e.g. alcohol consumption and cigarette smoking are equivocal. On the other extreme, foods containing caffeine are strong clastogens in the *in vitro* systems but no influence on chromosome breakage is demonstrable in the whole animal.

In consideration of these factors, as mentioned, the questionnaire was designed to accomodate information on many of these aspects. Hence, besides arsenic content in drinking water, the other parameters recorded in table I are sex, age, exposure to pesticides, smelter, chemicals containing arsenic, quantity of water, coffee, wine and cigarettes consumed, as well as health status. These provide a survey of the relevant life style of the subject and may influence the genetic damage observed in the lymphocyte cultures. A summary of the data is provided in Table II.

The number of cells analyzed for chromosome aberrations in each case is also given in Table I. This shows that in most cases the number of available metaphases was sufficient to study 200 cells. In 16/190 cases of successful chromosome preparations, however, the number of cells studied was less than 200 per case; amongst these only 2 cases provided us with less than 100 cells;

1 with 90 and the other with 79 cells. None-the-less, even these samples are generally considered large enough to estimate the frequency of aberrations. Hence, all these data were utilized in the final analysis of aberrations. In the case of SCE's (181 cases) the data were obtained from as many as 50 cells per individual up to case no. 71 and from analyses of 25 cells thereafter. Most laboratories around the world consider 20 cells to be optimal sample for this analysis in view of the uniformity of SCE frequency in the cell population (Perry and Evans, 1974).

The overall frequency of chromosome aberrations in our entire population ranged between 0.00 to 0.13 aberrations/cell. In our experience, the average for a healthy population lies usually between 0.03 and 0.05 aberrations per cell. Thus the range shows that whereas some individuals in the population studied for this project displayed exceptional stability for chromosome structure, the others clearly expressed a rather high frequency of aberrations. The range for SCE's in population was between 5.48 to 15.28 per cell. The upper value here, again, is higher compared to the usual range of between 7 and 10 SCE's per cell for normal, healthy individuals whose lymphocytes are treated with 10^{-5} M BrdU. Thus in case of both, chromosome aberrations and SCE's, in certain individuals some factors are operative which are responsible for an increase in the frequency of the types of genetic damage under study.

Considering all the factors discussed above in demography of the population (Table II) and the raw data on the frequency of genetic damage observed in the sample Table I, it appears that the age factor in the exposed and control population favors the odds for higher aberration frequency in the exposed group.

STATISTICAL METHODS

Because of unavoidable correlations in the sample between exposure to arsenic in drinking water and other factors which may influence frequencies of chromosome aberrations and SCE's (e.g., age, wine consumption), the data were analyzed by multiple linear regression to determine if increased amounts of arsenic in drinking water contribute to increased frequencies of chromosome aberrations and SCE's once other potentially confounding variables (see Table III for codes used below) are accounted for. This analysis proceeded as follows:

(1) The categorical variables, wine consumption, cigarette consumption, and city, were converted to dichotomous variables -- WINEGRP (0 = no wine consumed, 1 = 1 or more glasses per day), CGSGRP (0 = non-smoker, 1 = smoker), and CITYGRP (0 = rural Nevada, 1 = urban Nevada). These plus four other dichotomous variables, SEX, PEST, SMELT, and CHEM, were used as independent variables in the analysis.

(2) Since the major concern of the study was the effect of arsenic on chromosomes, three ways of representing arsenic exposure were used in the regression analysis. These were: (a) the raw data on arsenic content of the water being drunk by an individual (ARSENIC as an independent variable), (b) arsenic exposure as a dichotomous variable according to USEPA standards (less than 0.05 ppm = control, greater than or equal to 0.05 = exposed (ARSGRP as an independent variable), and (c) arsenic content of water times glasses of water drunk per day (ARSWAT as an independent variable). Separate regressions were run using each of these variables.

(3) AGE was the ninth independent variable in the analysis.

(4) Coffee consumption was skewed to the right. Therefore a logarithmic transformation ($\text{LOGCOFF} = \log_{10} (\text{COFFEE} + 1)$) was computed, and one set of regressions used COFFEE as the tenth independent variable while another set used LOGCOFF.

(5) Three dependent variables were used in the sets of regressions which were run with the independent variables described above. Examination of normal probability plot was used to assess deviations for normality. These were:

(a) SCE (raw data normally distributed, so no transformation was deemed necessary).

(b) CRABNOR (chromosome aberrations per cell).

(c) CRABLOG = $\log_{10} (100 * \text{CRABNOR} + 1)$. This was used because the raw data on chromosome aberrations were skewed to the right. The transformation successfully normalized the data.

Thus 18 multiple regressions were run (3 dependent variables times 3 ways of measuring arsenic exposure times 2 ways of measuring coffee consumption).

EVALUATION OF THE DATA

The raw data on CRABNOR and CRABLOG in relation to arsenic content in drinking water are reproduced as scattergraphs in figures 7 and 8, respectively. A comparison of chromosome aberrations in the control and exposed populations is presented in Figures 9 and 10.

A total of 19,264 cells were analyzed from lymphocyte preparations obtained from 104 cases in the exposed population. A total of 18,240 cells were studied from 86 control individuals. These average out to be about 189 cells/individual in exposed population and 192 cells/individual in the control. These samples are sufficiently large to yield reliable estimates of aberration frequencies. The frequency of chromosome aberrations turned out to be 0.033/cell for the control group and 0.026/cell for the exposed population.

For study of SCE's a total of 98 individuals was studied from the exposed population and a sample of 83 individuals in the control group. A scattergraph of raw data for the entire population is given in Figure 11. A comparison for the data on SCE's shows that the frequency of SCE's in the control group is similar to the frequency in various groups of the exposed population (Figure 12). An overall average of 8.301 SCE's in the control does not differ significantly from an overall frequency of 8.306 SCE's/cell in the exposed group.

A set of simple correlation coefficients between all pairs of variables is produced in Table 4. The data were so analyzed to find out if any of the covariates considered in the study had any effect on the frequency of aberrations and SCE's. This was carried out since agents like caffeine do induce chromosome aberrations in tissue culture of mammalian cells and in plants (see, e.g. Kihlman, 1976) even though its effect on this parameter is not evident when consumed as a beverage and ingested by the whole body. Table 5, summarizes the relationship between various parameters and genetic damage.

The six multiple regressions using SCE as a dependent variable were all statistically significant, but only 11.1% - 13.6% of the total variance in SCE was explained by the 10 independent variables as a group. Of the independent variables, CIGSGRP was significant in all six cases (smokers have more SCE's than non-smokers). The two regressions using ARSWAT as the measure of arsenic exposure were marginally significant for that variable (t for the regression coefficient = 2.044, $p = 0.042$, with COFFEE; $t = 2.041$, $p = 0.043$, with LOGCOFF). An increase in arsenic exposure as measured by ARSWAT leads to a modest increase in SCE frequency, holding other variables constant. However, this does not appear for ARSENIC concentration in water, or ARSGRP as defined by USEPA standards. Because of this, and because there is almost certainly considerable error in volunteers' estimates of their daily water consumption, the results with ARSWAT should be viewed skeptically. The only variable measured in this study which clearly increases SCE frequency is cigarette use.

The six regressions using CRABNOR as a dependent variable were all statistically significant, with 10.9% - 13.0% of the variance in CRABNOR being explained by the 10 independent variables as a group. CITYGRP was significant in all 6 cases, and COFFEE in the three regressions in which it was used. With CRABLOG as the dependent variable, only the three regressions with COFFEE were significant. (The three with LOGCOFF were not). In the three significant regressions, however, the only significant independent variable was again CITYGRP. The urban Nevadans in this sample exhibit higher frequencies of chromosome aberrations than the rural Nevadans, other things being equal, and there is some indication that coffee consumption may increase chromosome aberration frequency. However, arsenic exposure has no relationship with chromosome aberrations in this sample.

Further Analysis of Data by Project Officer

The data for twenty-two participants with reported exposures to pesticides, smelters, and/or chemicals were excluded from this analysis due to the unknown effects of these exposures on cytogenetic outcome measures. Since the arsenic exposed participant population was significantly older than the comparison population, the sample was divided into three age strata (<20 years, >20 and <50 years, and >50 years). Multiple regression analysis was used to test the relationship(s) of sister chromatid exchanges and chromosome aberrations with levels of arsenic in drinking water (or intake of waterborne arsenic) and covariates sex; age; coffee, wine, and cigarette consumption; and residence location (rural or urban). None of the regressions for the first age stratum (<20 years) explained a significant part of the variations in sister chromatid exchanges, chromosome aberrations, or log transformed chromosome aberrations; p values ranged from 0.6043 to 0.8436. Removal of the two outlier values with Student t Residuals of 3 or larger reduced the p values but none were significant (the smallest value was 0.2024). All of the regressions for the second stratum (>20 and <50 years) were significant (p values ranged from 0.0008 to 0.0220) but the coefficients for arsenic (either as level in water or amount consumed) were not significant (p values ranged from 0.2371 to 0.6426). Removal of one outlier with a student t residual greater than 3 increased the p values sufficiently that none of the regressions should be regarded as significant (p values ranged from 0.2003 to 0.3778). All of the regressions for age group >50 years were significant (p values ranged from 0.0003 to 0.0857) but the coefficients for arsenic were not significant (p values ranged from 0.1361 to 0.6959). Since the coefficient for residence location was significant for all of these regressions and residence location is strongly related to arsenic level there might be reason for concern that the arsenic effect is masked. However, since the coefficients for residence location are positive indicating a higher frequency of sister chromatid exchanges and chromosome aberrations in the urban areas which have low levels of waterborne arsenic, there does not appear to be any indication of an arsenic related effect.

CONCLUSIONS

This study compares data on cytogenetic parameters of two populations. One was 'exposed' to arsenic in drinking water to the extent of 2.18 times more than mandated by the current National regulations. The other group has been drinking water containing arsenic in quantities within those permitted by the USEPA. The data do not show any increase in the incidence of genetic damage (as measured by chromosome aberrations and SCE's) in the 'exposed' population. These studies, therefore, might indicate that there exists no evidence of genetic damage in human populations exposed to moderate quantities of arsenic in drinking water. In the present study, most individuals were exposed to 0.1 mg/l of total arsenic in drinking water and some had been consuming water containing twice as much, or even more, arsenic. The quantity of water consumed by this exposed group is also higher than in the control group since most of these individuals are farm, or out-door, workers. The summer temperature in the desert of Nevada coupled with very low humidity also creates larger demands for consumption of water.

The frequency of genetic aberrations is known to be higher in older individuals and very young children compared to adults in their twenties and thirties. If one considers these parameters alone the frequency of damaged cells in the exposed populations should have been higher. The lower frequency of such damage in exposed group may be attributed to the out-door life style of this group and to a minor degree, though questionable, to the drinking (wine) levels of the control group.

Even though evidence pointing to mutagenicity and carcinogenicity of arsenic at relatively higher doses has been strongly suggested (Fishbein, 1981; Benko, 1977; Pershagen, 1981) and hearing loss in children has been reported (Benko and Seymon, 1977) the present data do not suggest such damage when arsenic is consumed in modest quantities in water. Similar lack of health effect has been suggested by Southwick et al (1977) in the so-called Utah Report on the subject. Our studies, though not compiled for analysis of carcinogenic potential of arsenic, do not indicate an increased incidence of cancer in our exposed population. This is strongly suggested by a lack of increased incidence of SCE's by arsenic exposure in our population in view of the fact that direct, though only qualitative, correlation is found to exist between the induction of SCE's by a given agent and its ability to cause neoplasia (Perry and Evans, 1975). Also in our survey we did not come across any specific complaints about hearing loss.

In summary, the data presented here provide reasonable evidence that there is no indication of increased evidence of genetic damage as measured by chromosome aberrations and sister chromatid exchanges in the lymphocytes of subjects exposed for five years to 0.1 mg/l or slightly higher concentrations of arsenic in drinking water.

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TABLE 1: DETAILED DATA ON POPULATION CHARACTERISTICS, CHROMOSOME DAMAGE AND SISTER CHROMATID EXCHANGES FOR EVERY INDIVIDUAL VOLUNTEER SUBJECT.

CASE ID	ARSENIC PPM	CHROMOSOME ABERRATIONS PER CELL	NUMBER OF CELLS	SCE PER CELL	SEX	AGE	PEST EXPOSURE	GLASSES TO WATER				COFFEE UINE				CIGARETTES HEALTH			
								SMELT	CHEN	GLASSES PER DAY	CUPS PER DAY	GLASSES PER DAY	FACCS PER DAY	PER DAY	PER DAY	CITY	CITY	CITY	CITY
001	001	0.015	0.130	200	08.50	F	47	M	M	05	25	0	1.5	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
002	002	0.015	0.075	200	09.10	M	52	M	M	03	08	1	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
003	003	0.015	0.090	200	07.96	M	17	M	M	04	00	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
004	004	0.005	0.050	200	10.40	M	24	M	M	02	04	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
005	005	0.005	0.065	200	08.58	M	21	M	M	01	00	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
006	006	0.005	0.075	200	10.76	F	53	M	M	03	03	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
007	007	0.005	0.050	200	10.76	M	48	M	M	04	02	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
008	008	0.050	0.060	200	11.08	F	52	M	M	05	03	0	1.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
009	009	0.050	0.070	200	09.42	M	76	M	M	02	02	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
010	010	0.045	0.055	200	09.42	F	39	M	M	07	05	2	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
011	011	0.045	0.045	200	06.60	F	13	M	M	08	00	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
012	012	0.045	0.052	133	06.60	M	09	M	M	00	00	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
013	013	0.045	0.055	200	06.60	F	07	M	M	04	00	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
014	014	0.005	0.040	200	09.22	F	31	M	M	04	03	1	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
015	015	0.005	0.020	200	09.22	F	18	M	M	04	00	0	0.0	0	0	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY	HIDDEN VALLEY
016	016	0.100	0.130	200	09.62	M	51	M	M	08	04	0	2.0	0	0	FALLON	FALLON	FALLON	FALLON
017	017	0.085	0.060	200	08.50	M	25	M	M	09	12	3	0.0	0	0	FALLON	FALLON	FALLON	FALLON
018	018	0.005	0.075	200	10.19	M	21	M	M	05	02	0	0.0	0	0	FALLON	FALLON	FALLON	FALLON
019	019	0.005	0.080	200	09.29	F	20	M	M	02	02	1	0.0	0	0	FALLON	FALLON	FALLON	FALLON
020	020	0.005	0.050	200	10.00	M	25	M	M	02	03	1	0.0	0	0	FALLON	FALLON	FALLON	FALLON
021	021	0.005	0.035	200	08.46	M	20	M	M	05	01	0	0.2	0	0	FALLON	FALLON	FALLON	FALLON
022	022	0.005	0.035	200	08.68	M	20	M	M	06	02	0	0.0	0	0	FALLON	FALLON	FALLON	FALLON
023	023	0.100	0.050	200	08.68	M	56	M	M	03	02	0	0.0	0	0	FALLON	FALLON	FALLON	FALLON
024	024	0.100	0.045	200	09.38	F	49	M	M	02	06	0	0.0	0	0	FALLON	FALLON	FALLON	FALLON
025	025	0.085	0.045	200	08.94	F	19	M	M	04	01	0	0.0	0	0	FALLON	FALLON	FALLON	FALLON
026	026	0.005	0.045	200	07.02	M	21	M	M	08	10	0	0.0	0	0	FALLON	FALLON	FALLON	FALLON
027	027	0.005	0.045	200	08.50	M	21	M	M	06	02	0	0.5	0	0	FALLON	FALLON	FALLON	FALLON
028	028	0.005	0.025	200	07.48	F	22	M	M	02	03	0	0.2	0	0	FALLON	FALLON	FALLON	FALLON
029	029	0.005	0.035	200	08.04	F	42	M	M	07	03	0	0.0	0	0	FALLON	FALLON	FALLON	FALLON
030	030	0.095	0.050	200	07.52	M	42	M	M	04	08	0	0.0	0	0	FALLON	FALLON	FALLON	FALLON

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TABLE 1: continuous ...

011	047	0.093	0.050	200	04.50	M	17	M	M	M	07	01	0	0.0	0	FALLON
012	048	0.255	0.020	200	08.88	F	59	M	M	M	07	02	1	0.0	0	FALLON
013	049	0.255	0.023	079		M	34	Y	M	M	07	03	0	0.0	0	FALLON
014	050	0.050	0.040	200	08.45	F	44	M	M	M	08	10	0	0.0	0	FERNET
015	051	0.050	0.025	200	07.84	F	35	M	M	M	02	03	2	0.0	0	FERNET
016	052	0.040	0.040	200	08.05	F	47	M	M	M	03	05	0	1.0	0	FERNET
017	053	0.040	0.035	200	10.33	M	49	M	M	M	05	07	1	0.0	0	FERNET
018	054	0.005	0.050	200	08.92	M	23	M	M	M	04	02	9	0.0	0	RENO
019	055	0.005	0.025	200	10.00	M	26	M	M	M	03	10	0	1.0	0	RENO
020	056	0.005	0.025	200	08.60	M	20	M	M	M	09	03	1	0.0	0	RENO
021	057	0.005	0.025	200	09.44	M	26	M	M	M	02	00	0	0.0	1	RENO
022	058	0.005	0.010	200	09.50	M	20	M	M	M	03	01	0	0.0	0	RENO
023	059	0.005	0.030	200		F	20	M	M	M	02	02	0	0.0	0	RENO
024	023	0.005	0.040	200	06.68	M	22	M	M	M	02	04	0	0.0	0	RENO
025	060	0.080	0.015	200	09.19	M	45	M	M	M	03	03	0	1.0	0	FALLON
026	061	0.010	0.030	200	08.46	M	26	M	M	M	06	05	0	0.0	0	FALLON
027	062	0.010	0.035	200	07.86	F	21	M	M	M	01	02	0	0.0	0	FALLON
028	064	0.015	0.010	200	07.98	M	62	M	M	M	06	02	0	0.0	0	FALLON
029	065	2.275	0.015	200	09.32	F	45	M	M	M	03	04	0	0.0	0	FALLON
030	066	0.010	0.050	200	08.04	F	49	M	M	M	04	03	0	0.0	0	FALLON
031	068	0.175	0.025	200	07.94	M	59	Y	M	M	05	05	0	0.0	1	FALLON
032	069	0.175	0.010	200	08.98	F	58	M	M	M	07	04	0	0.0	1	FALLON
033	070	0.045	0.030	200	08.66	M	53	M	M	M	07	04	0	0.0	1	FALLON
034	071	0.045	0.045	200	08.56	F	51	M	M	M	03	07	0	0.0	1	FALLON
035	072	0.000	0.040	200	08.98	F	53	M	M	M	03	05	0	0.0	1	FALLON
036	073	0.000	0.030	200	07.86	M	54	Y	M	M	05	04	0	0.0	1	FALLON
037	074	0.010	0.020	100	07.82	M	29	Y	M	Y	08	04	0	0.0	1	FALLON
038	075	0.275	0.030	100	07.88	M	55	Y	Y	M	03	03	0	0.0	1	FALLON
039	076	0.170	0.035	200	08.16	M	42	M	M	M	07	06	0	0.0	0	FALLON
040	077	0.170	0.015	200	09.52	F	41	M	M	M	00	03	1	0.0	1	FALLON
041	067	0.275	0.030	200	08.72	F	58	M	M	M	04	05	0	1.0	1	FALLON
042	078	0.170	0.020	200	07.70	M	10	M	M	M	08	00	0	0.0	0	FALLON
043	079	0.170	0.040	200	08.28	F	17	M	M	M	03	00	0	0.0	0	FALLON
044	080	0.170	0.050	200	07.84	M	25	Y	M	M	14	04	0	0.0	1	FALLON
045	081	0.010	0.040	100	10.08	M	60	M	Y	M	10	13	0	1.5	0	FALLON
047	083	0.050	0.030	200	09.44	M	42	M	M	M	03	03	0	1.5	0	FALLON
048	084	0.050	0.010	200	07.80	F	56	M	M	M	03	02	0	1.0	0	FALLON
049	085	0.045	0.025	200	08.22	F	22	M	M	M	02	07	0	1.0	0	FALLON
070	086	0.045	0.030	200	07.70	M	20	M	M	M	11	03	0	0.2	0	FALLON

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TABLE I: continuous ...

071	087	0.005	0.040	100	08.08	F	21	N	N	N	02	02	0	0.0	0	RENO
072	088	0.005	0.035	200	07.76	F	22	N	N	N	03	02	0	0.0	0	RENO
073	089	0.035	0.045	200	09.88	F	28	N	N	N	02	05	0	1.0	0	FALLON
074	090	0.035	0.040	200	11.22	F	10	N	N	N	03	00	0	0.0	0	FALLON
075	091	0.035	0.030	200	07.72	F	55	N	N	N	02	03	0	0.0	1	FALLON
076	100	0.040	0.005	200	08.92	N	44	N	N	N	03	04	1	0.0	0	FALLON
077	101	0.000	0.030	200	08.20	N	36	N	N	N	03	02	0	0.0	0	CINCINNATI
078	102	0.000	0.030	200	07.72	N	48	N	N	N	06	03	1	0.0	0	CINCINNATI
079	103	0.005	0.045	200	05.84	F	26	N	N	N	03	00	0	0.0	0	RENO
080	104	0.010	0.035	200	06.88	F	42	N	N	N	05	03	0	0.0	0	FALLON
081	105	0.140	0.025	200	06.40	F	34	N	N	N	02	02	0	0.0	0	FALLON
082	106	0.140	0.030	200	07.16	N	18	N	N	N	06	05	0	0.0	1	FALLON
083	107	0.005	0.020	200	08.92	F	41	N	N	N	04	04	0	0.0	0	RENO
084	108	0.055	0.045	200	07.76	F	41	N	N	N	02	00	0	1.0	1	FALLON
085	109	0.055	0.040	200	06.88	N	18	N	N	N	03	00	0	0.0	0	FALLON
086	110	0.170	0.015	200	05.84	F	16	N	N	N	05	01	0	0.0	0	RENO
087	076	0.170	0.030	200	06.44	N	42	N	N	N	07	04	0	0.0	0	FALLON
088	078	0.170	0.015	200	06.76	N	10	N	N	N	08	00	0	0.0	0	FALLON
089	080	0.170	0.050	200	09.88	N	23	Y	N	N	14	04	0	0.0	1	FALLON
090	082	0.005	0.040	200	06.12	N	24	Y	N	N	08	00	0	0.0	0	FALLON
091	093	0.005	0.030	200	09.36	F	20	N	N	N	01	02	0	0.0	1	RENO
092	111	0.386	0.045	200	07.88	N	48	N	N	N	02	03	0	0.0	0	RENO
093	094	0.005	0.025	200	07.04	N	23	N	N	N	03	03	1	0.0	0	FALLON
094	095	0.005	0.020	200	07.44	N	25	N	N	N	04	04	0	0.0	0	RENO
095	096	0.005	0.020	200	08.92	N	25	N	N	N	05	00	0	0.0	0	RENO
096	097	0.005	0.025	200	08.24	N	21	N	N	N	06	03	0	0.0	0	RENO
097	098	0.005	0.005	200	10.14	F	21	N	N	N	03	02	0	0.0	0	RENO
098	099	0.005	0.015	200	08.28	F	47	N	N	N	02	03	0	0.0	0	RENO
099	112	0.005	0.020	200	07.48	F	30	N	N	N	03	06	0	0.0	1	RENO
100	113	0.005	0.025	200	07.92	N	26	N	N	N	02	05	3	0.0	0	RENO
101	114	0.115	0.040	200	08.76	F	22	Y	N	N	15	00	1	0.0	1	VIRGINIA FOOTHILLS
102	115	0.005	0.030	200	10.64	F	22	N	N	N	04	02	0	0.0	0	RENO
103	116	0.005	0.010	100	08.12	N	20	N	N	N	08	01	0	0.0	1	RENO
104	118	0.005	0.000	090	06.92	N	19	N	N	N	09	01	0	0.0	1	RENO
105	119	0.005	0.010	200	06.56	N	19	N	N	N	04	02	0	0.0	0	RENO
106	120	0.095	0.025	200	06.88	N	41	N	N	N	09	02	1	0.0	0	FALLON
107	121	0.095	0.010	200	07.76	F	35	N	N	Y	08	03	0	0.0	0	FALLON
108	122	0.045	0.015	200	07.20	N	51	Y	N	N	03	05	1	0.0	0	FALLON
109	123	0.020	0.050	200	07.76	N	80	N	N	N	07	00	0	0.0	0	FALLON
110	124	0.020	0.015	200	09.00	F	75	N	N	N	04	00	0	0.0	1	FALLON

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TABLE I: continuous ...

111	125	0.045	0.005	200	09.28 F	43	M	M	M	04	05	1	0.0	0	FALLON
112	124	0.045	0.015	200	07.88 F	17	M	M	M	05	01	1	0.0	1	FALLON
113	127	0.100	0.010	200	08.28 F	35	M	M	M	08	05	0	1.0	0	FALLON
114	128	0.100	0.015	200	07.72 M	13	M	M	M	02	01	0	0.0	0	FALLON
115	129	0.100	0.010	200		14	M	M	M	03	00	0	0.0	0	FALLON
116	130	0.100	0.020	200	06.72 F	70	M	M	M	00	02	0	0.0	0	FALLON
117	131	0.110	0.020	200	07.84 M	22	M	M	M	05	01	0	0.0	0	FALLON
118	132	0.100	0.010	200	08.14 F	38	Y	M	M	02	10	0	1.5	1	FALLON
119	133	0.095	0.040	200	09.88 F	32	M	M	M	08	02	0	0.0	1	FALLON
120	134	0.095	0.025	200	06.72 M	41	M	M	M	06	04	0	0.0	0	FALLON
121	135	0.095	0.000	200	08.28 F	10	M	M	M	07	00	0	0.0	0	FALLON
122	136	0.015	0.025	200	06.84 M	15	Y	M	M	09	00	0	0.0	0	FALLON
123	137	0.015	0.035	200	06.76 M	11	M	M	M	04	00	0	0.0	0	FALLON
124	138	0.100	0.010	200	06.80 M	37	M	M	M	03	05	0	0.0	1	FALLON
125	139	0.005	0.010	200	06.52 M	27	M	M	M	07	04	1	0.0	1	REND
126	140	0.005	0.025	200	07.56 F	26	M	M	M	01	03	0	0.0	0	REND
127	141	0.005	0.033	150	06.80 F	44	M	M	M	03	02	1	0.0	0	REND
128	142	0.100	0.040	200	09.04 M	42	M	M	M	02	04	0	0.0	1	FALLON
129	143	0.035	0.010	200	07.08 F	32	Y	M	M	05	03	0	0.0	0	FALLON
130	144	0.035	0.010	200	05.92 M	32	Y	M	M	06	03	0	0.0	0	FALLON
131	145	0.100	0.020	200	07.60 M	14	M	M	M	01	00	0	0.0	0	FALLON
132	146	0.100		000	11.96 M	49	M	M	M	06	13	0	2.0	0	FALLON
133	147	0.100	0.030	100	10.88 F	40	M	M	M	08	02	0	0.0	0	FALLON
134	148	0.100	0.025	200	07.45 F	44	M	M	M	05	02	0	0.5	1	FALLON
135	149	0.100	0.015	200	05.88 M	14	M	M	M	02	02	0	0.0	0	FALLON
136	150	0.100	0.010	200	06.84 M	44	M	M	M	03	01	0	0.0	0	FALLON
137	151	0.100	0.015	200	07.36 M	58	M	M	M	04	06	0	2.0	0	FALLON
138	152	0.100	0.010	200	08.48 F	55	M	M	M	00	03	0	0.0	1	FALLON
139	153	0.100	0.025	200		40	M	M	M	08	05	0	0.0	0	FALLON
140	154	0.100	0.020	200	10.20 F	46	M	M	M	07	00	0	0.0	1	FALLON
141	155	0.100	0.010	200	09.04 M	18	M	M	M	09	00	0	0.0	0	FALLON
142	156	0.100	0.050	100	07.00 M	43	M	M	M	02	10	0	0.0	1	FALLON
143	157	0.100	0.005	200	06.16 F	57	M	M	M	01	12	0	0.0	0	FALLON
144	158	0.100	0.000	100	07.52 M	64	M	M	M	07	04	0	0.0	0	FALLON
145	159	0.100	0.020	200	07.80 M	44	M	M	M	03	05	0	0.0	0	FALLON
146	160	0.100	0.020	200	07.16 F	35	M	M	M	02	01	0	0.0	0	FALLON
147	161	0.100	0.025	200	07.44 M	36	M	M	M	05	07	0	0.0	0	FALLON
148	162	0.100	0.005	200	08.68 F	50	M	M	M	01	06	0	0.0	0	FALLON
149	163	0.100	0.015	200	07.64 M	47	Y	M	M	12	06	0	0.0	0	FALLON
150	164	0.100	0.005	200	07.24 M	42	M	M	M	08	00	0	0.0	0	FALLON

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TABLE I: continuous

151	145	0.100	0.010	200	07.32	M	49	M	M	M	08	00	0	0.0	0	FALLON
152	146	0.100	0.020	200	09.80	M	53	M	M	M	06	10	0	0.0	0	FALLON
153	147	0.100	0.005	200	09.28	F	46	M	M	M	07	03	0	0.0	1	FALLON
154	148	0.100	0.030	150	08.88	F	39	M	M	M	04	03	0	0.0	0	FALLON
155	149	0.100	0.020	200	06.88	F	51	M	M	M	03	03	0	0.0	0	FALLON
156	150	0.100	0.010	200	07.40	M	65	Y	M	M	01	04	0	0.0	1	FALLON
157	151	0.100	0.010	200	08.16	F	51	M	M	M	03	06	0	1.0	1	FALLON
158	152	0.100	0.020	200	07.40	M	51	M	Y	M	03	05	0	0.0	0	FALLON
159	153	0.005	0.010	200	08.04	F	18	M	M	M	04	01	1	0.0	1	RENO
160	154	0.005	0.000	200	06.48	F	21	M	M	M	02	04	1	0.2	0	RENO
161	155	0.005	0.010	200	09.24	M	30	M	M	M	03	02	0	0.0	0	RENO
162	156	0.005	0.010	200	09.54	M	30	M	M	M	04	04	0	1.0	1	RENO
163	157	0.005	0.030	200	08.20	M	19	M	M	M	04	07	1	0.0	0	RENO
164	158	0.005	0.020	200	08.92	M	28	M	M	M	05	08	5	0.5	0	RENO
165	159	0.005	0.015	200	07.92	M	19	M	M	M	10	01	0	0.0	1	RENO
166	160	0.100	0.035	200	15.28	F	33	M	M	M	03	13	0	1.5	1	FALLON
167	161	0.100	0.010	200	09.08	F	51	M	M	M	03	05	0	0.0	1	FALLON
168	162	0.100	0.010	200	09.40	F	41	M	M	M	06	04	0	0.0	0	FALLON
169	163	0.100	0.005	200	07.52	M	34	M	M	M	05	12	0	0.0	1	FALLON
170	164	0.100	0.005	200	07.68	M	52	M	M	M	06	05	0	0.0	0	FALLON
171	165	0.100	0.004	179	08.54	M	42	M	M	M	08	08	0	0.0	0	FALLON
172	166	0.100	0.030	160	10.90	F	56	M	M	M	02	07	0	0.0	1	FALLON
173	167	0.100	0.025	200	09.60	F	43	M	M	M	35	02	1	0.0	0	FALLON
174	168	0.100	0.035	200	07.04	F	73	M	M	M	07	02	0	0.0	1	FALLON
175	169	0.100	0.040	200	08.72	M	47	M	M	M	04	18	0	0.5	0	FALLON
176	170	0.100	0.025	200	06.88	F	43	M	M	M	05	05	2	0.0	0	FALLON
177	171	0.100	0.040	200	09.44	F	50	M	M	M	01	04	0	0.0	1	FALLON
178	172	0.100	0.005	200	08.12	F	62	M	M	M	04	04	0	0.0	0	FALLON
179	173	0.100	0.015	200	10.25	F	57	M	M	M	04	12	0	1.0	0	FALLON
180	174	0.100	0.015	200	08.84	M	35	M	M	M	05	06	0	0.0	0	FALLON
181	175	0.100	0.000	200	08.00	M	49	M	M	M	06	10	1	0.0	0	FALLON
182	176	0.100	0.020	200	07.84	F	47	M	M	M	05	03	0	0.0	1	FALLON
183	177	0.100	0.025	123	07.60	M	35	M	M	M	05	02	0	0.0	0	FALLON
184	178	0.100	0.015	200	07.44	M	34	M	M	M	06	01	0	0.0	0	FALLON
185	179	0.100	0.020	166	06.68	M	48	M	M	M	10	06	0	0.0	0	FALLON
186	180	0.100	0.005	200	11.20	M	23	M	M	M	10	02	1	0.0	0	FALLON
187	181	0.100	0.050	200	07.88	M	53	M	M	M	03	06	0	0.0	0	FALLON
188	182	0.005	0.040	200	08.52	M	28	M	M	M	03	00	0	0.0	0	RENO
189	183	0.005	0.040	200	07.80	M	30	Y	M	M	03	08	2	0.0	0	RENO
190	184	0.005	0.050	200	08.84	M	23	M	M	M	07	05	0	0.0	0	RENO

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TABLE I: continuous ...

191	205	0.005	0.025	200	08.84	M	21	M	N	N	07	03	0	0.0	1	RENO
192	206	0.005	0.030	200	08.44	F	29	M	N	N	03	03	2	0.0	1	RENO
193	207	0.005	0.035	200	07.68	F	19	Y	N	N	03	00	1	0.0	0	RENO
194	208	0.005	0.045	200	08.72	M	26	M	N	N	04	03	0	0.5	0	RENO
195	209	0.005	0.020	200	08.40	M	25	M	N	N	06	01	1	0.0	0	RENO
196	210	0.100	0.025	200	06.40	F	37	M	N	N	02	04	1	0.0	0	FALLON
197	211	0.100	0.020	200	07.48	M	13	M	N	N	03	00	0	0.0	0	FALLON

FOOTNOTES: (1) FOR EXPOSURE TO PESTICIDES, CHEMICALS, SHELTERS; M = NOT EXPOSED, Y = EXPOSED.
 (2) FOR HEALTH; 0 = NO REPORTED SYMPTOMS OF ARSENIC POISONING, 1 = SYMPTOMS OF ARSENIC POISONING.

TABLE II. DATA ON THE POPULATION CHARACTERISTICS WITH REGARDS TO SOME
VARIABLES USED IN THE STUDY

Variable	Classification	Number of individuals studied in the group:		
		Control (%)	Exposed (%)	Total (%)
Sex (var. 7)	Females:	36 (41.9)	49 (46.7)	85 (44.5)
	Males:	50 (58.1)	56 (53.3)	106 (55.5)
	Total:	86	105	191
Pesticides (var. 9)	Not exposed:	80 (93.0)	95 (90.5)	175 (91.6)
	exposed:	6 (7.0)	10 (9.5)	16 (8.4)
	Total:	86	105	191
Smelter	Not exposed:	85 (98.8)	102 (97.1)	187 (97.9)
	exposed:	1 (1.2)	3 (2.9)	4 (2.1)
	Total:	86	105	191
Chemicals (var. 11)	Not exposed:	85 (98.8)	103 (98.1)	188 (98.4)
	exposed:	1 (1.2)	2 (1.9)	3 (1.6)
	Total:	86	105	191
Wine (var. 16)	No wine:	64 (74.4)	92 (87.6)	156 (81.7)
	wine:	22 (25.6)	13 (12.4)	35 (8.3)
	Total:	86	105	191
Cigaretts (var. 16)	Non-smokers:	72 (83.7)	89 (84.8)	161 (84.3)
	smokers:	14 (16.3)	16 (15.2)	30 (15.7)
	Total:	86	105	191
Residence (var. 18)	Rural:	27 (31.4)	97 (92.4)	124 (64.9)
	Urban:	59 (68.6)	8 (7.6)	67 (5.1)
	Total:	86	105	191

TABLE III: Summary of definitions and coding of variables used in statistical interpretation of the data

AGE = Age of the participant in years.

ARSENIC = Arsenic content of drinking water in ppm or mg/l.

ARSWAT = (ARSENIC) X (glasses of water drunk per day).

ARSGRP = Groups or populations of volunteers who have been drinking water containing 0.05 mg/l arsenic or more for five years (exposed) or those who have been drinking water far containing <0.05 mg/ml arsenic for 5 years (control); 0 = control, 1 = exposed.

CHEM = Exposure to potentially carcinogenic/mutagenic chemicals; 0 = not exposed, 1 = exposed.

CIGSGRP = Cigarette consumers and non smokers; 0 = non-smoker; 1 = smoker.

CITYGRP = Classification according to location of residence; 0 = rural Nevada (Fallon, Ferneley), 1 = urban Nevada (Reno, Hidden Valley, Virginia Foothills)

COFFEE = Coffee consumption in cups per day; 0 = non consumers, 1 = consumers.

CRABLOG = $\log_{10} (100 \times \text{CRABNOR} + 1)$.

CRABNOR = Chromosome aberrations per cell.

LOGCOFF = $\log_{10} (\text{COFFEE} + 1)$.

PEST = Exposure to pesticides; 0 = not-exposed, 1 = exposed.

SCE = Sister chromatid exchanges per cell.

SEX = Sex; 0 = female, 1 = male.

SMELT = Ever worked or not in smelter plant(s); 0 = no exposure, 1 = exposure.

WINEGRP = Wine consumption or lack of it; 0 = no wine consumption, 1 = 1 or more glasses/day.

TABLE IV A SET OF SIMPLE CORRELATION COEFFICIENTS BETWEEN ALL PAIRS OF VARIABLES (for definitions of codes see TABLE III)

	ARSENIC 2	ARSGRP 3	CRABNOR 4	CRABLOG 5	SCE 6	SEX 7	AGE 8	PEST 9	SMELT 10	CHEM 11
2	1.0000									
3	.7944	1.0000								
4	-.1577	-.1945	1.0000							
5	-.1474	-.2092	.9335	1.0000						
6	-.0267	-.0235	.1994	.1741	1.0000					
7	-.0528	-.0697	.0222	.0166	-.1451	1.0000				
8	.3790	.4054	-.0439	-.0842	.0443	-.1324	1.0000			
9	.1198	.0205	-.0118	.0144	-.1398	.1363	.0258	1.0000		
10	.1400	.0448	.0438	.0701	-.0056	.1359	.1419	.0967	1.0000	
11	.0092	.0341	-.0785	-.0699	-.0615	.0298	.0131	-.0380	.2747	1.0000
12	.0947	.1127	-.0330	-.0456	.0226	.1501	-.0474	.1286	.0082	.0568
13	.6393	.5603	-.0919	-.0970	.0463	-.0043	.1755	.1734	.0245	.0150
14	.0814	.1084	.1670	.0848	.1718	.0275	.3180	-.0056	.1496	.0081
15	.1118	.1138	.0476	.0065	.1592	.0054	.3820	-.0219	.1421	.0495
16	-.1353	-.1781	-.0066	-.0107	.0288	-.0230	-.1273	.0711	-.0732	-.0632
17	-.0422	-.0168	.1420	.0963	.2106	-.0927	.0565	-.0716	.0361	-.0574
18	-.5734	-.6551	.2585	.2389	.0879	.0773	-.4328	-.0777	-.1087	-.0939
12	WATER	ARSUAT	COFFEE	LOGCOFF	WINEGRP	CIGSGRP	CITYGRP			
13										
14										
15										
16										
17										
18										
12	WATER	ARSUAT	COFFEE	LOGCOFF	WINEGRP	CIGSGRP	CITYGRP			
13	.7395	1.0000								
14	-.0402	-.0052	1.0000							
15	-.0717	.0019	.8837	1.0000						
16	.1035	.0367	.0220	.0762	1.0000					
17	-.0427	-.0778	.3259	.2716	-.1356	1.0000				
18	-.1124	-.4026	-.1201	-.1314	.1927	.0038	1.0000			

TABLE V. SUMMARY OF MULTIPLE LINEAR REGRESSION ANALYSES OF CHROMOSOME ABERRATIONS AND SISTER CHROMATID EXCHANGES AS FUNCTIONS OF ARSENIC EXPOSURE AND OTHER INDEPENDENT VARIABLES.

Dependent Variable	Standardized Regression Coefficients for Independent Variables ¹											F ¹	r ¹		
	ARSENIC	ARSGRP	ARSWAT	SEX	AGE	PEST	SMELT	CHEM	COFFEE	LOGCOFF	WINEGRP			CIGSGRP	CITYGRP
SCE	.061	.052		-.097	.047	-.119	.002	-.043	.151		.030	.168+	.134	2.23+	11.0
				-.098	.049	-.114	.007	-.046	.149		.031	.167+	.134	2.21+	11.1
	.057	.054	.163+	-.102	.052	-.136	.010	-.046	.157		.011	.170+	.171	2.65*	13.1
				-.093	.044	-.117	.006	-.050		.129	.025	.183+	.129	2.12+	11.0
CRABNOR	-.013	-.007		-.094	.044	-.112	.011	-.052		.129	.026	.181+	.133	2.11+	11.0
				-.097	.046	-.134	.014	-.052		.139	.006	.185+	.169	2.55*	13.0
	-.018	-.006		-.003	.026	.035	.057	-.066	.162+		-.058	.065	.316*	2.62*	12.8
			.040	-.003	.025	.033	.056	-.066	.163+		-.058	.065	.319*	2.62*	12.8
CRABLOG	-.014	-.043		-.004	.023	.027	.057	-.065	.164+		-.062	.067	.339*	2.65*	13.0
				.009	.067	.030	.070	-.068		.028	-.042	.110	.311*	2.18+	10.9
	-.017	-.043		.009	.065	.028	.069	-.067		.028	-.042	.111	.317*	2.17+	10.9
			.033	.008	.063	.023	.070	-.066		.029	-.045	.113	.334*	2.19+	11.0
	-.014	-.043		-.020	-.010	.059	.096	-.071	.092		-.062	.041	.281*	1.94+	9.8
				-.021	-.007	.057	.094	-.072	.092		-.063	.040	.263*	1.96+	9.9
	-.017	-.043	.020	-.020	-.013	.054	.095	-.070	.093		-.063	.043	.296*	1.95+	9.8
				-.013	.014	.056	.103	-.072		.014	-.052	.068	.278	1.81	9.2
	-.043		-.014	.017	.054	.102	-.072		.013	-.054	.067	.262	1.83	9.3	
		.016	-.013	.010	.052	.103	-.071		.015	-.053	.069	.293	1.81	9.2	

¹Significance levels indicated as follows: + -0.01 < p < 0.05, * - p < 0.01

A map of Nevada showing locations of Reno and Fallon, the area from where the study population was derived.



Figure 1.

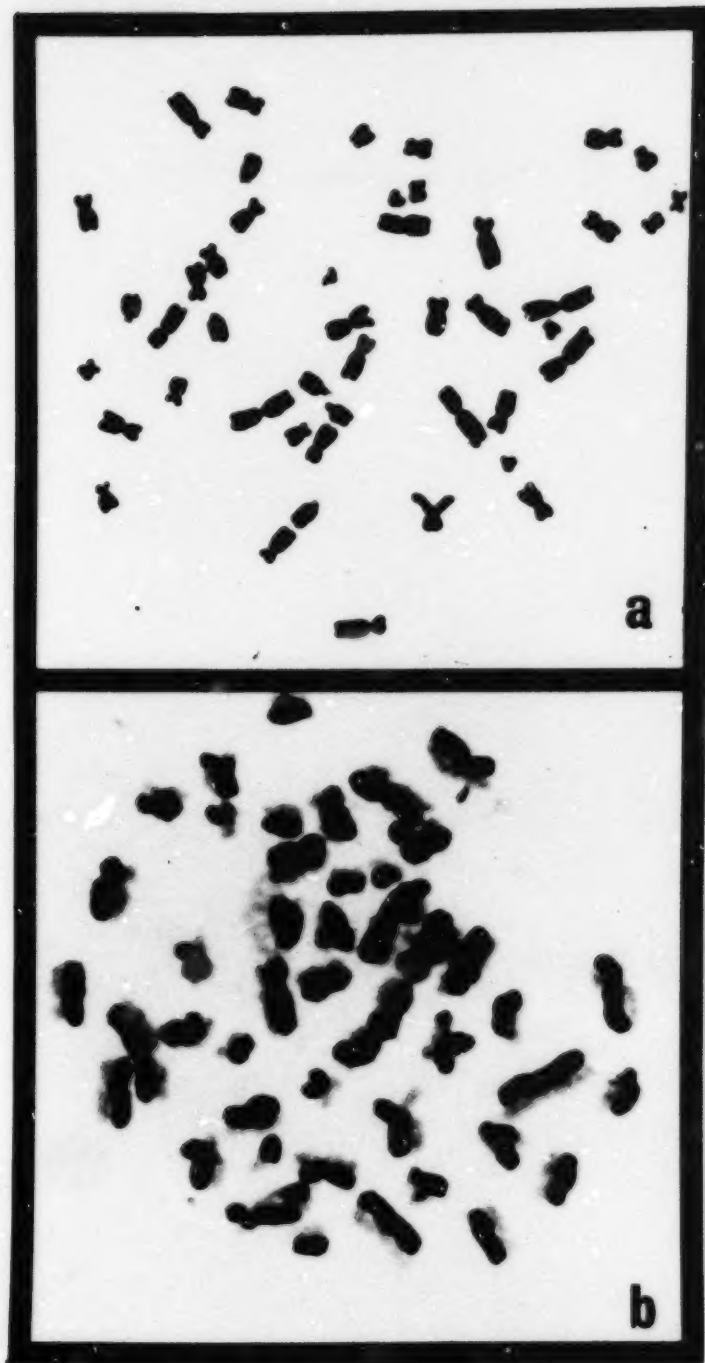
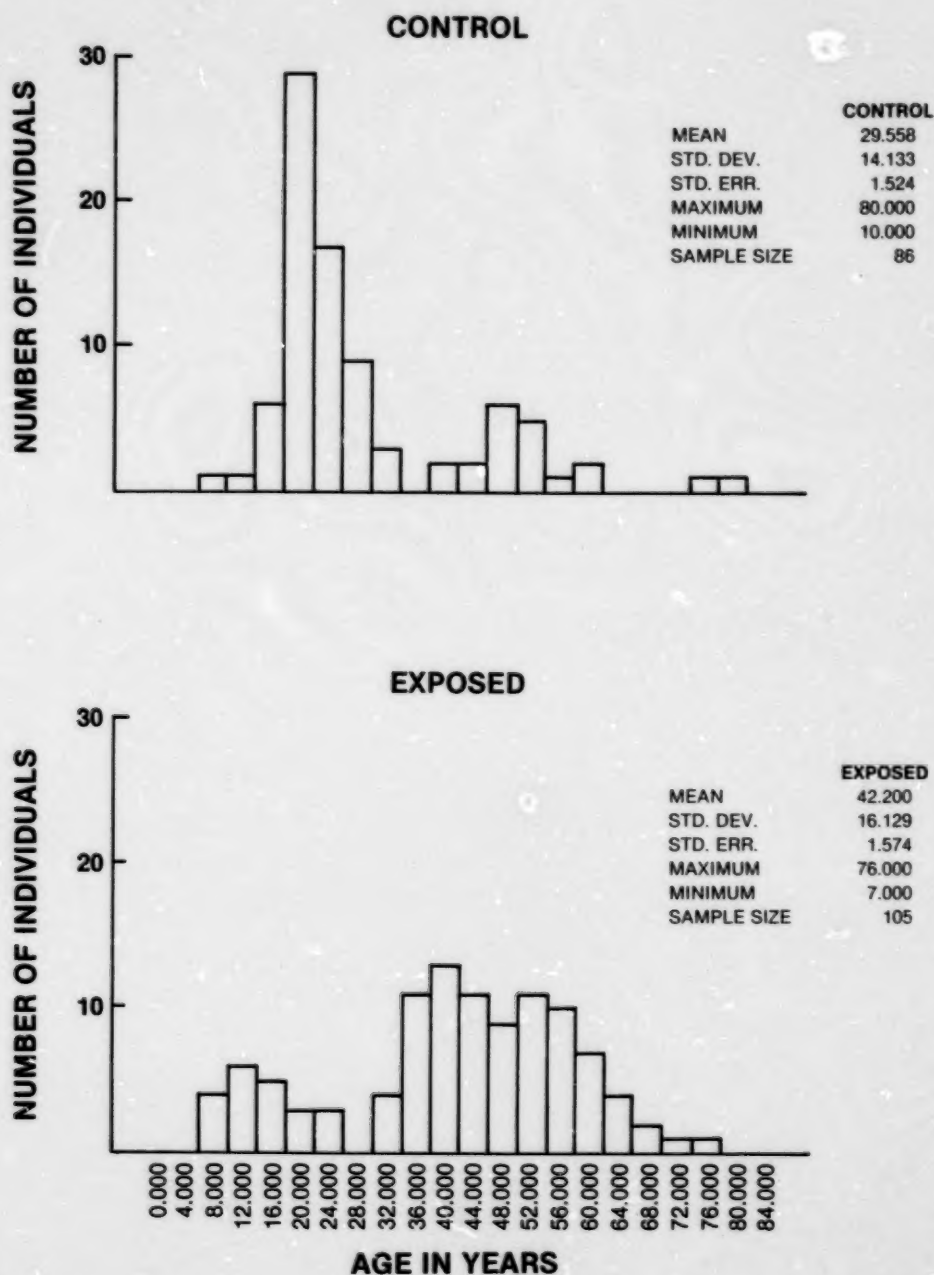


FIGURE 2. Examples of preparations used in our laboratory to study (a) chromosome aberrations (a normal cell from the first cell cycle, 48 hour lymphocyte culture) and (b) sister chromatid exchanges (BrdU incorporated for two cell cycles, 72 hour lymphocyte culture).

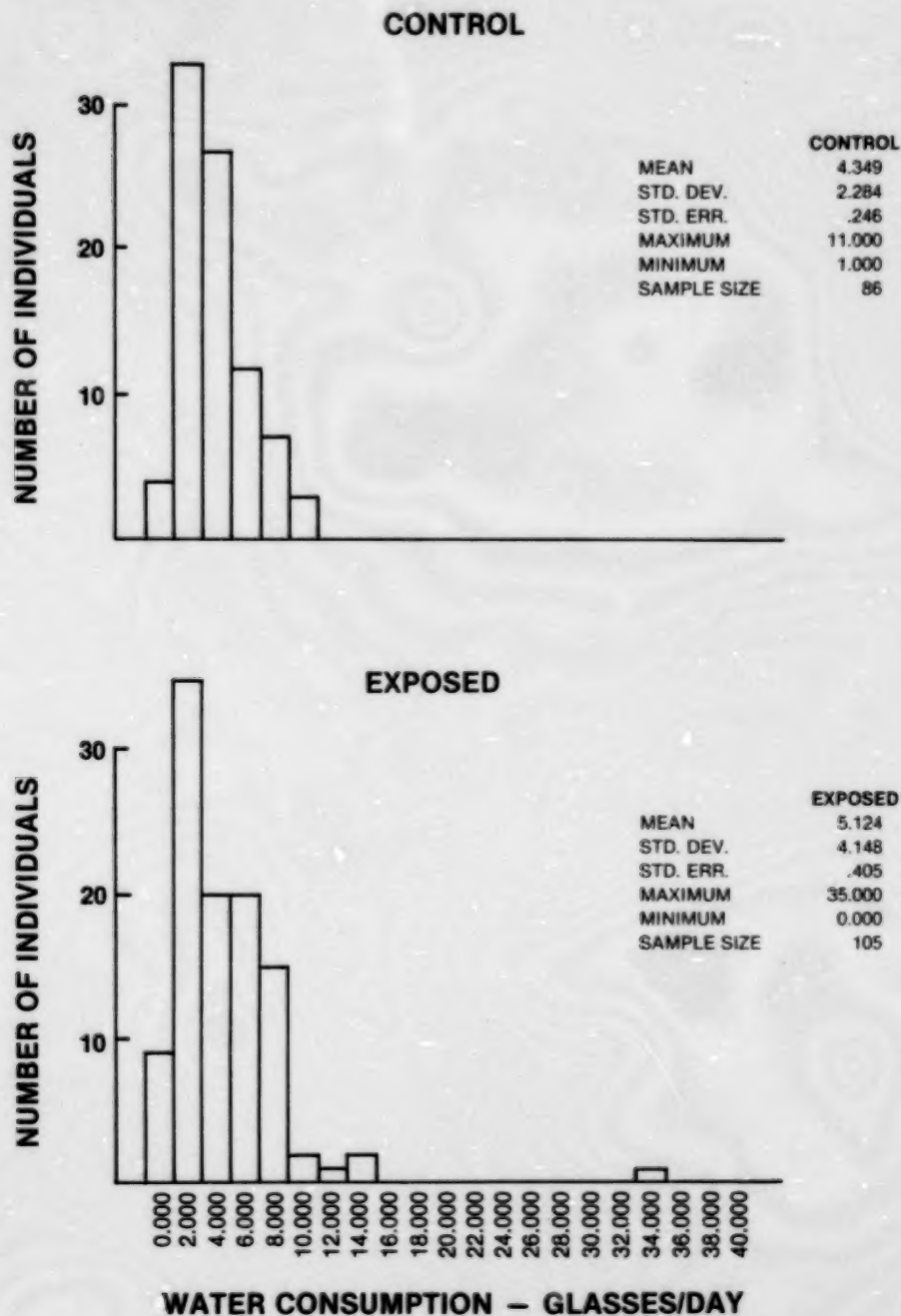
A histogram and related parameters of AGE distribution (var. 8) in the control and exposed population sample.



ANALYSIS OF VARIANCE TABLE					
SOURCE	SUM OF SQUARES	DF	MEAN SQUARE	F VALUE	TAIL PROBABILITY
BETWEEN GROUPS	7555.7289	1	7555.7289	32.43	.0000
WITHIN GROUPS	44034.0093	189	232.9842		
TOTAL	51589.7382	190			

FIGURE 3.

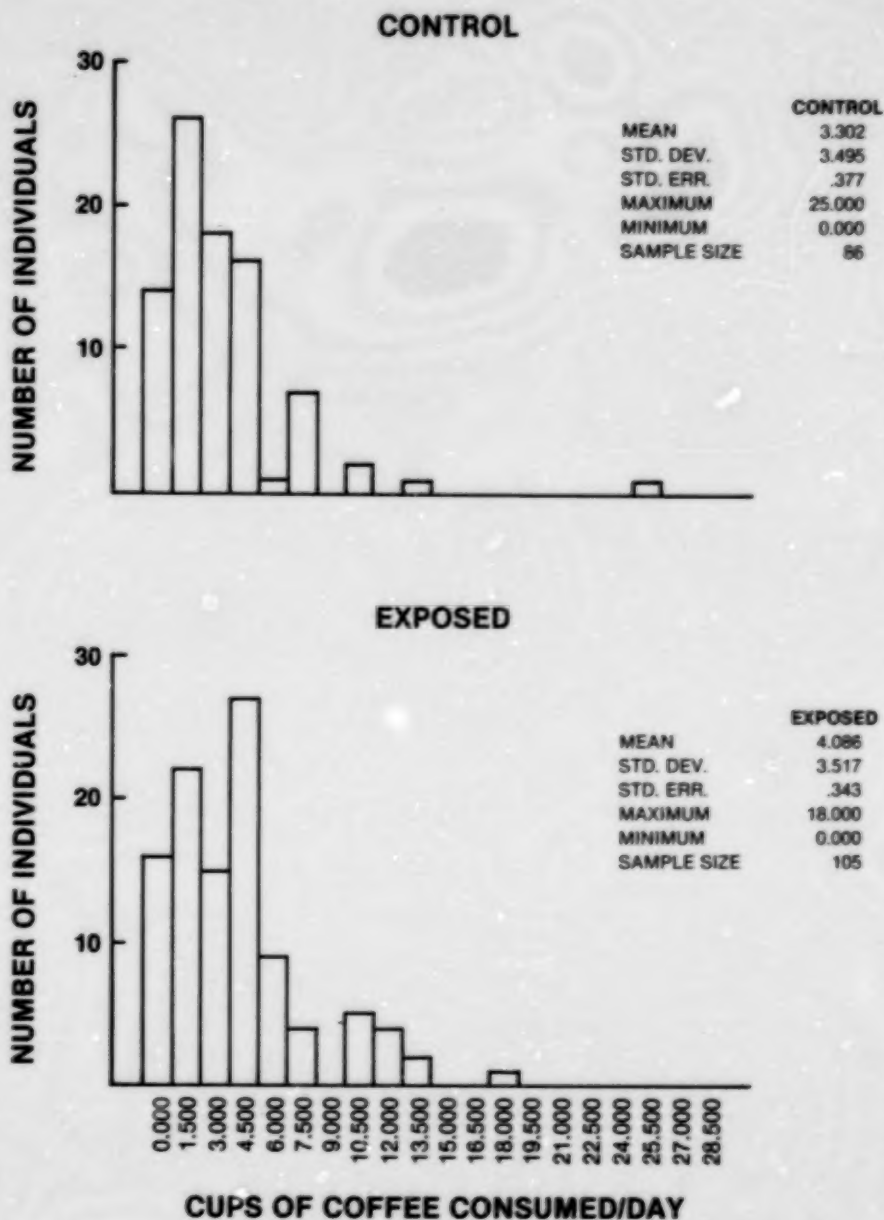
Histogram and related parameters of the values for WATER consumed/day (var. 12) by the control and exposed population.



ANALYSIS OF VARIANCE TABLE					
SOURCE	SUM OF SQUARES	DF	MEAN SQUARE	F VALUE	TAIL PROBABILITY
BETWEEN GROUPS	28.3940	1	28.3940	2.40	.1227
WITHIN GROUPS	2232.9254	189	11.8144		
TOTAL	2261.3194	190			

FIGURE 4.

Histogram showing the amount of COFFEE consumed per day (var. 14) by the control and exposed sample population. Related parameters are given also.



ANALYSIS OF VARIANCE TABLE					
SOURCE	SUM OF SQUARES	DF	MEAN SQUARE	F VALUE	TAIL PROBABILITY
BETWEEN GROUPS	29.0141	1	29.0141	2.36	.1262
WITHIN GROUPS	2324.3681	189	12.2982		
TOTAL	2353.3822	190			

FIGURE 5.

Arsenic Exposure in control and exposed groups.

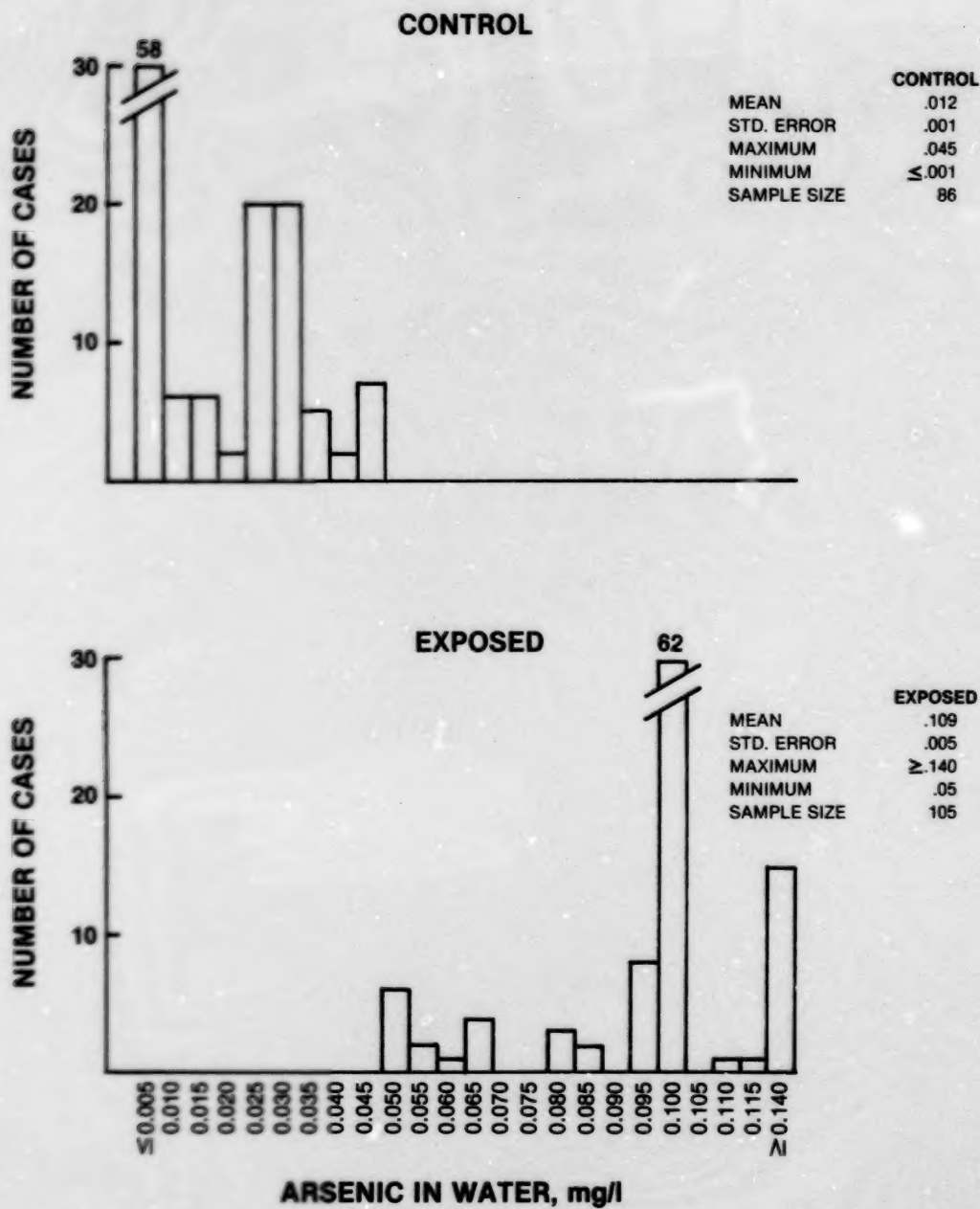


FIGURE 6.

A scattergraph showing the raw data on chromosome aberrations (CRABNOR) in relation to the ARSENIC concentration in drinking water of the sample population.

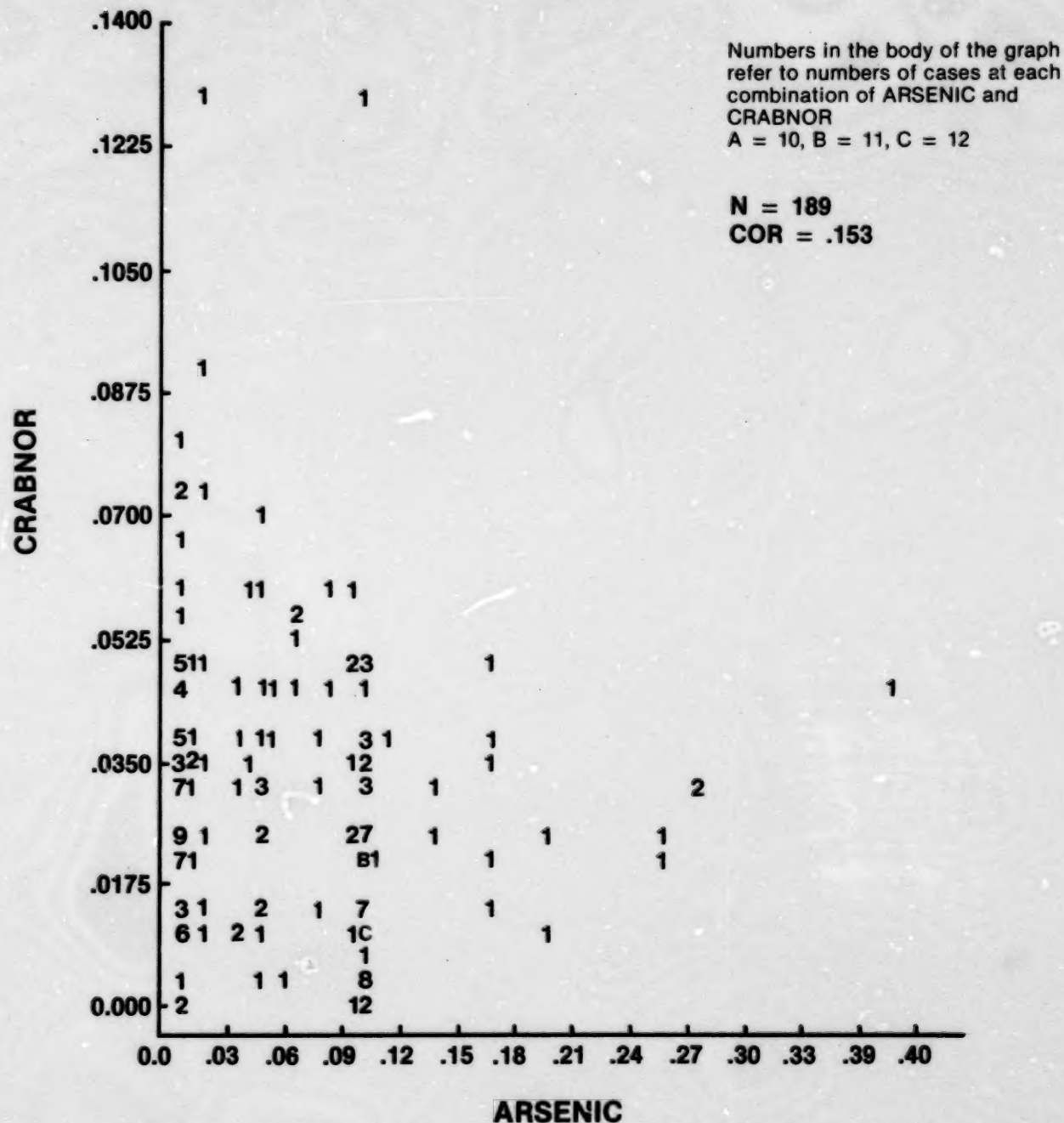


FIGURE 7.

A scattergraph showing CRABLOG in relation to the variable ARSENIC. See figure 7 for explanation of numbers.

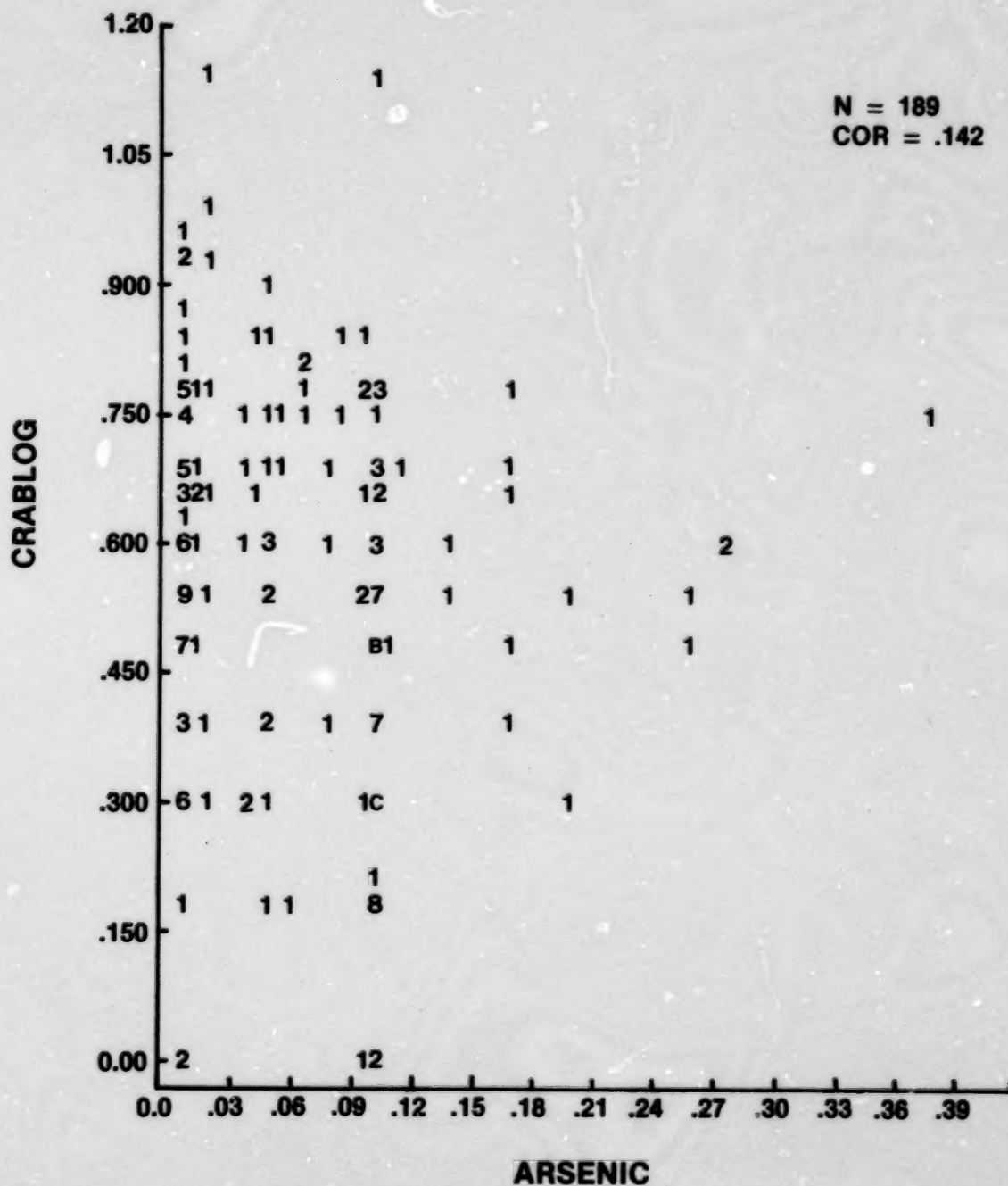
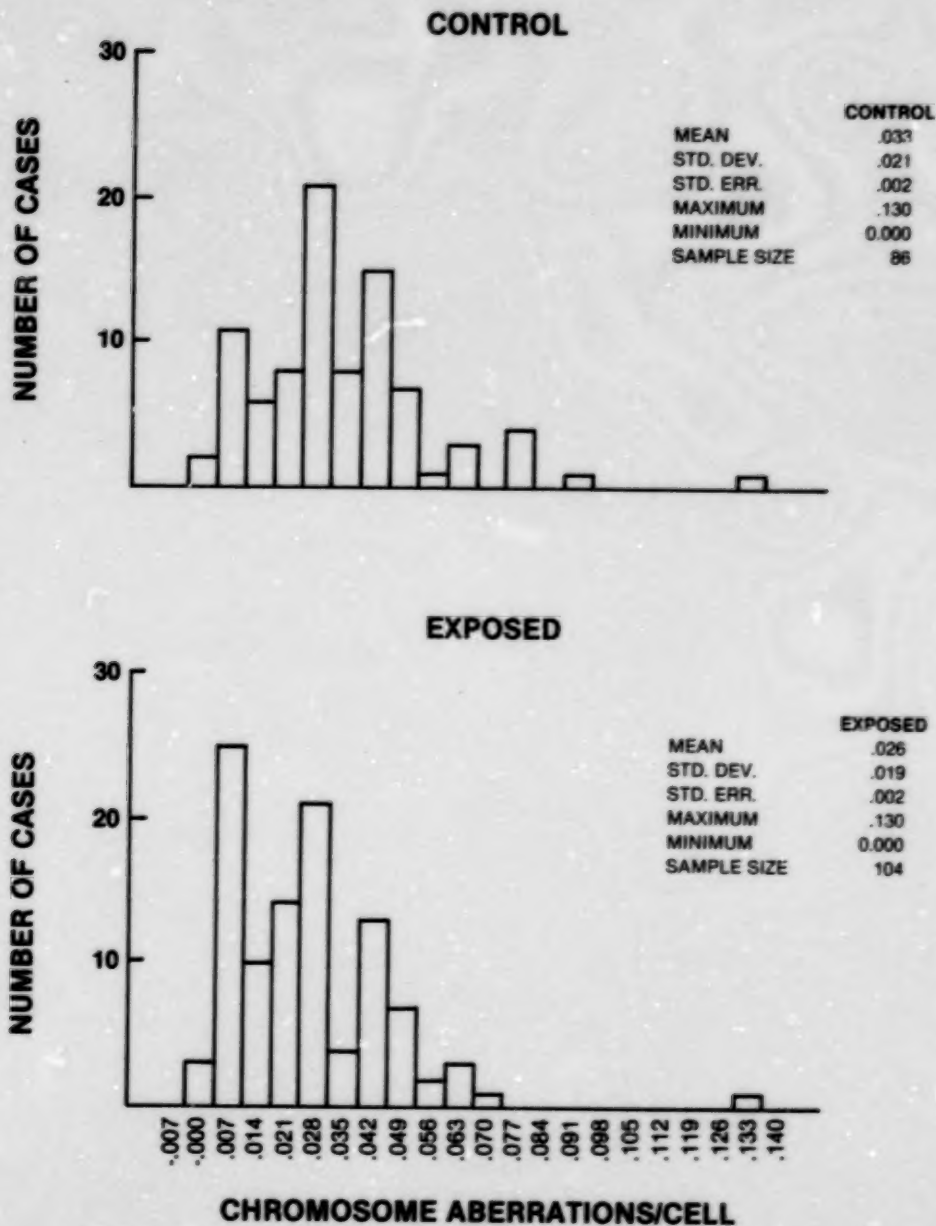


FIGURE 8.

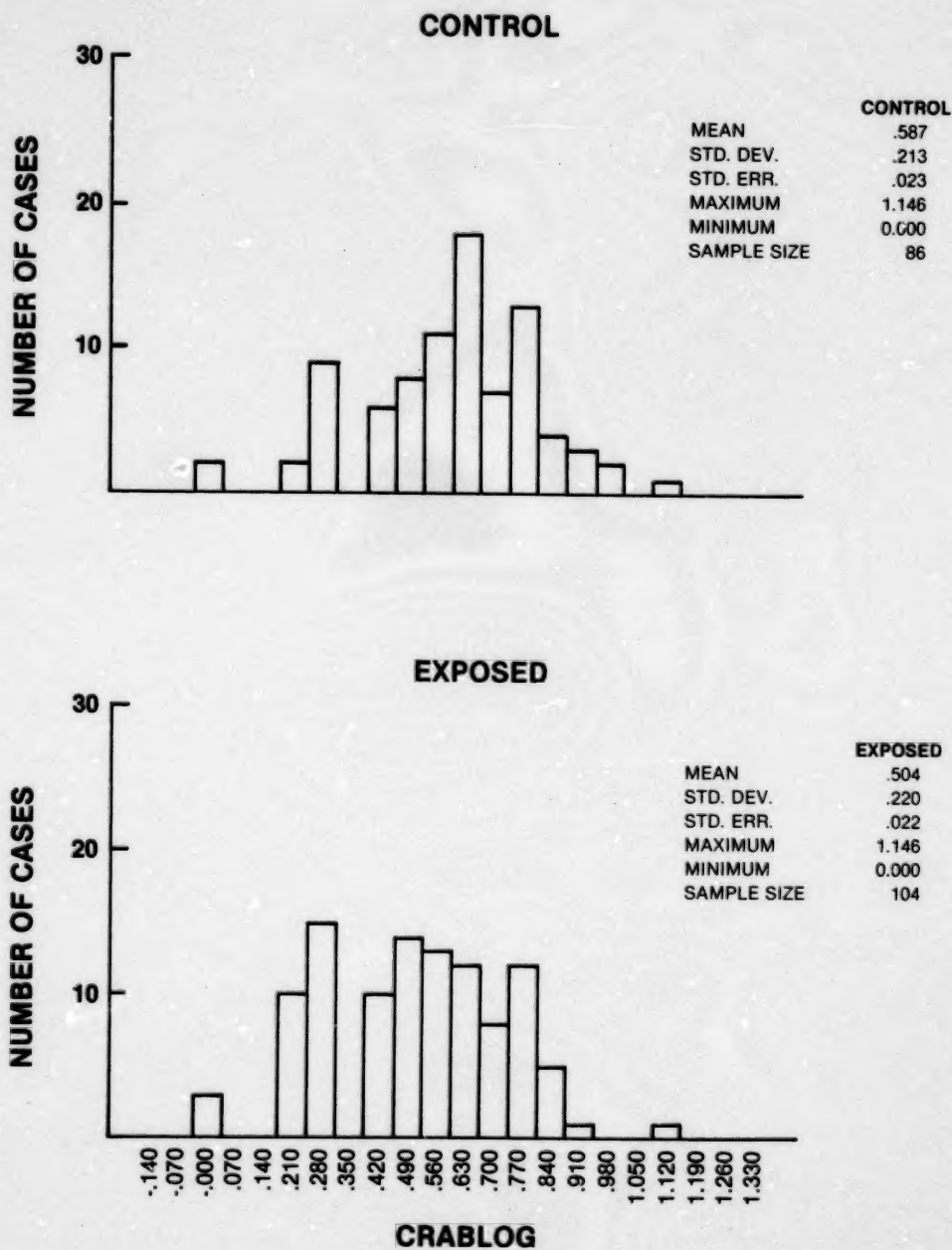
Number of cases in control and exposed groups with various frequencies of chromosome aberrations per cell (var. 4).



ANALYSIS OF VARIANCE TABLE					
SOURCE	SUM OF SQUARES	DF	MEAN SQUARE	F VALUE	TAIL PROBABILITY
BETWEEN GROUPS	.0024	1	.0024	5.92	.0159
WITHIN GROUPS	.0768	188	.0004		
TOTAL	.0792	189			

FIGURE 9.

A histogram showing CRABLOG (var. 5) for control and exposed groups



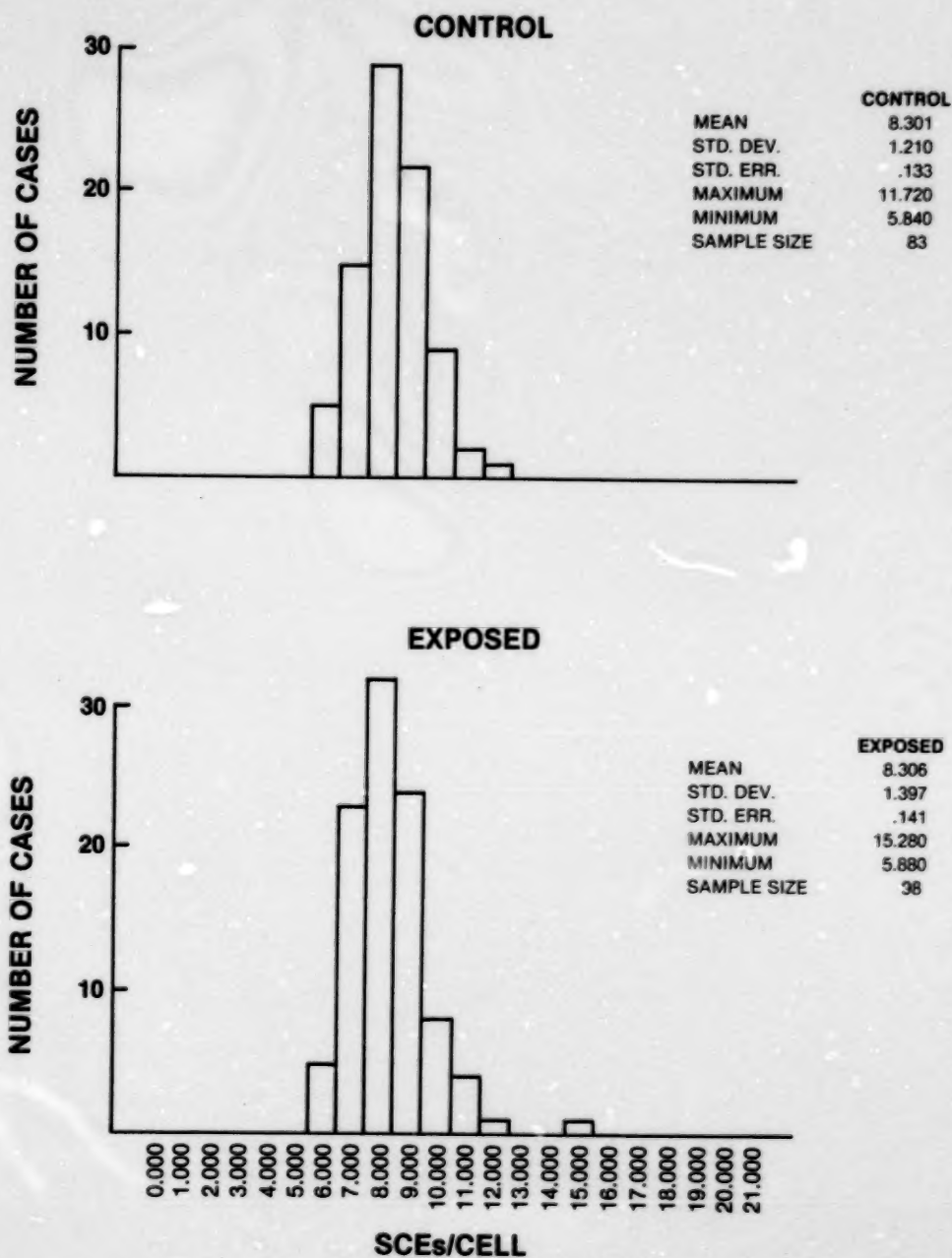
ANALYSIS OF VARIANCE TABLE					
SOURCE	SUM OF SQUARES	DF	MEAN SQUARE	F VALUE	TAIL PROBABILITY
BETWEEN GROUPS	.3270	1	.3270	6.97	.0090
WITHIN GROUPS	8.8236	188	.0469		
TOTAL	9.1505	189			

FIGURE 10.

[illegible]

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Histogram of SCE (var. 6) for control and exposed groups.



ANALYSIS OF VARIANCE TABLE					
SOURCE	SUM OF SQUARES	DF	MEAN SQUARE	F VALUE	TAIL PROBABILITY
BETWEEN GROUPS	.0014	1	.0014	.00	.9772
WITHIN GROUPS	309.4016	179	1.7285		
TOTAL	309.4030	180			

FIGURE 12.

APPENDIX



Nevada Mental Health Institute

P.O. Box 2460 • TELEPHONE 322-6961
RENO, NEVADA 89805

INFORMED CONSENT FOR ARSENIC STUDY

I _____ hereby give my consent to the staff of the Nevada Mental Health Institute for the collecting and use of my blood for their study dealing with cytological effects of arsenic in drinking water.

The nature and purpose of this study, the risks involved and any possible outcome of my participation in this study have been explained to me. I am also aware that all results stemming from this study, referring directly to me, will be held with confidentiality and shall be used only for statistical purposes.

I CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE CONSENT TO THE STUDY AND THAT THE EXPLANATIONS THEREIN REFERRED TO WERE MADE BEFORE I SIGNED.

Date

Signature of Participant

Witness

When participant is a minor or incompetent to give consent:

Date

Signature of person authorized to
consent for participant

Witness

Relationship to participant

As. #

I.D. # 43-181

Name (optional) _____

Address (optional) _____

Telephone # (optional) _____

Interviewer _____

Date of Interview / /
mo. day yr.

Arsenic Content _____ ppm.

Analyzed by _____ On _____.

1. SEX Male _____, Female _____

2. RACE, ETHNICITY
Caucasian _____
Oriental _____
Black _____
Spanish _____
Other _____

3. How old are you? _____
Years

4. What is your date of birth? / /
mo. day yr.

5. What is/was your main occupation? And your place of work?

6. Have you ever worked where you had contact with pesticides, herbicides or weed killers? (Do not include casual contact in your home garden).

Yes _____

No _____

If Yes:

A. What did you do in this job?

B. Where was this? (Name of company, city and state)

C. When did you first work with these chemicals? (Dates) _____ / _____
mo. yr.

D. When did you last work with them? (Dates) _____ / _____
mo. yr.

E. Did you work with these substances continuously or only part of the time?

Continuously _____

Part Time _____

F. Can you tell me the names of the substances you worked with?

7. Have you ever worked for a smelter that handled ores of copper, lead, zinc, gold, or silver?

Yes _____

No _____

If yes:

A. What is the name of the plant and its location (City and State?)

B. What did you start to work at the smelter? (Dates) _____ / _____
mo. yr.

C. When did you last work there? (Dates) _____ / _____
mo. yr.

D. During that time, did you work there continuously or only part of the time?

Continuously _____

Part Time _____

3. Have you ever worked in a chemical plant?

Yes _____

No _____

If Yes:

A. What kind of chemicals were involved?

B. What is the name of the plant and location (City and State?)

C. Did the plant use or produce any substance containing arsenic?

Yes _____

No _____

Don't Know _____

D. Did the plant use or produce any substance containing selenium?

Yes _____

No _____

Don't Know _____

A. What substance was that?

E. When did you first work there? (dates)

_____/_____
mo. yr.

F. When did you last work there? (Dates)

_____/_____
mo. yr.

G. During that time did you work there continuously or only part of the time?

Continuously _____

Part Time _____

9. Does your drinking water come from the public water company or your own private well?

Public _____

Well _____

Both _____

Other _____

Specify _____

A. For how many years has your water come from this supply? _____

B. Do you have a water softener?

Yes _____

No _____

C. Do you have a special filter on your water?

Yes _____

No _____

a. What is the name of the filter? _____

10. How many standard 8 oz glasses of this water do you drink in a 24 hour day in,

Summer _____, Winter _____.

11. How many cups of coffee, tea or other hot drinks do you have in a 24 hour day in,

Summer _____, Winter _____.

12. How many standard 8 oz. glasses of this water do you have in a 24 hour day made into drinks such as orange juice, Koolaid or ice tea in,

Summer _____, Winter _____.

13. Do you use this water in your home for cooking?

Yes _____

No _____

14. How many bottles or cans of soft drinks do you have in a 24 hour day in,

Summer _____, Winter _____.

15. How many glasses of wine do you drink in a 24 hour day in,

Summer _____ Winter _____.

16. Over the past year have you changed the amount of water you drink other than seasonal changes?

Yes _____

No _____

17. Do you smoke cigarettes?

Yes _____

No _____

A. How many packs a day? _____

18. Do you use Selsun or Selsun Blue Shampoo? Yes _____ No _____

19. Have you ever had appendicitis?

Yes _____
No _____

20. Have you ever been treated by a doctor for a parasitic disease such as tapeworm or roundworm (not pinworms)?

Yes _____
No _____

Card No. 4
I.D. # _____

21. Tell me if you have had any of the following health problems in the last two years

A. Liver disease? (hepatitis, yellow jaundice)

Yes _____
No _____

B. Kidney disease?

Yes _____
No _____

C. Diseases of the nerves such as paralysis or numbness?

Yes _____
No _____

D. Emotional or mental (nervous) illness?

Yes _____
No _____

E. Heart trouble?

Yes _____
No _____

F. Cancer? (especially of the skin)?

Yes _____
No _____

G. Arthritis?

Yes _____
No _____

H. Ulcers of stomach or intestines?

Yes _____ No _____

I. Anemia or low blood?

Yes _____

No _____

J. A broken bone?

Yes _____

No _____

J. Which bone was that? _____ When was that? _____ / _____ How long _____
mo. yr. mo.

22. Did you ever have any Miscarriage or problems with a new born baby?

Yes _____

No _____

If Yes, Explain _____

23. Have you experienced any of the following during the past year?

- A. Tremors or shaking if the hands?
- B. Unusual coldness of the fingers or toes, such as during warm weather?
- C. More severe or more frequent headaches?
- D. Decrease in touch or temperature sensations in your hands?
- E. Decrease in touch or temperature sensations in your feet or legs?
- F. A tingling of your naval (belly button)?
- G. A loss of memory which interferes with your usual activities?
- H. More frequent or longer lasting depression, or feeling blue?
- I. Any unusual weight loss?
- J. A loss of appetite?
- K. Trouble with your energy level that has made your daily activities harder?
- L. Trouble with a stiff neck?
- M. Feelings of dizziness or trouble with your balance?
- N. Trouble with loose stools or diarrhea?

	Yes	No
A.		
B.		
C.		
D.		
E.		
F.		
G.		
H.		
I.		
J.		
K.		
L.		
M.		
N.		

		Yes	No
O. Trouble with nausea or vomiting?	O.		
P. Trouble with stomach pains or cramps?	P.		
Q. Darkening of any skin areas?	Q.		
R. Any unusual or unexplained skin rashes? or excessive itching?	R.		
S. Trouble with your nails becoming brittle?	S.		
T. More trouble than usual with dandruff?	T.		
U. Any abnormal loss of hair?	U.		
V. Any unusual loss of nails?	V.		
W. Any unusual pain in muscles or joints?	W.		
X. Any swelling of your ankles?	X.		

For Adult Females Only

24. Any irregular menstrual periods?

Yes _____
 No _____
 Not Applicable _____

25. Do you eat any of these foods at least once a week, average:

	No (1)	1 x/wk (2)	2-3 x/day (3)	1 x/day (4)	Several x /day (5)	In Past 2 Yes (1)	Days No (2)
Fish or shellfish							
Kidney or Kidney dishes							
Liver or liver dishes							
eggs-alone or in dishes							
Bread or baked goods							

26. Do you eat locally grown vegetables (raise your own or buy from a local grower)?

Yes _____
 No _____

27. Do you can or freeze these vegetables for winter use?

Yes _____
 No _____

28. Do you eat local poultry or livestock (raise or buy from local rancher)?

29. What was your highest grade you completed in school?

00 01 02 03

04 05 06 07

08 09 10 11

12

College/other post high school

13 14 15 16

Graduate school/other post college

17 18 19 20+

30. (optional) Which of these categories best describes your total family income before taxes for the past year?

(Please consider all sources) Just give me the category.

A. LESS THAN \$5,000

B. \$5,000 - \$9,999

C. \$10,000 - \$14,999

D. \$15,000 - \$19,999

E. \$20,000 - \$29,999

F. MORE THAN \$30,000

That is the end of your questionnaire. Thank you very much for your help.

I.D. #

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Pregnancy Complications And Miscarriages

[illegible]

What complications did you have if any.

Was the duration

Normal

Premature

If miscarriage(s) occurred

Pregnancy duration

Reason

Other Inform

Any birth defect among your children

Sex

Any such problems
among your rela-
tives